



ISSN 2456-3110

Vol 1 • Issue 1

May-Jun 2016

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS



Charaka
Publications

Indexed

Ayurvedic Management of *Ardita* - A Case Report

Mridula M.K., Aswathi A.T.¹

Resident Doctor, Arogya Bhavanam Hospital, New Delhi. ¹PG Scholar, Sri Sai Ayurvedic Medical College, Aligarh.

ABSTRACT

Ardita is a condition that develops due to excessive aggravation of *Vata* and causes distortion of face. Facial palsy the paralysis of facial nerve also affects the movement of facial muscles and shows similar symptoms. So we can almost correlate these diseases. Allopathic management of facial palsy includes the use of steroids and some anti-inflammatory drugs only, with a chance of recurrence and side effects. Present study reveals that *Ardita* can be managed successfully with ayurvedic treatments with lesser chance of recurrence and without any side effects.

Key words: *Ardita*, Facial palsy, Steroids, Ayurvedic treatments.

INTRODUCTION

Ardita is one among the 80 *Nanatmaja Vyadhis* of *Vata*. The word *Ardita* means partially destroyed. 'Ardhe hatham ithi ardhitham'. As per Ayurveda, excessively aggravated *Vayu* causes distortion in half of the face and curvature of the nose, eyebrow, forehead, eye and mandible. But Acharyas have different opinions about *Ardita*.

Acharya Charaka described it as a disease affecting only face. But Acharyas like Vagbhata and Sushruta pointing out the involvement of half of the body also. Causes of *Ardita* has also been explained in detail in Samhitas. Excessive laughing, speaking loudly, chewing hard food, yawning, sneezing, carrying heavy loads on head, sudden movement of head and neck, exposure to cold and wind etc. are some of the causes

for developing *Ardita*.

These *Nidanans* (aetiology) leads to vitiation of *Vata* and manifestation of symptoms of *Ardita*. The symptoms include distortion of the affected side of the face, deviation of angle of mouth to the normal side, tremors of the head, shaking of tooth, incomplete closure of the eye in the affected side, distortion of the nose, difficulty in speech and hoarseness of voice, loss of hearing and impairment in smell sensation, pain in the ear, difficulty in mastication and swallowing of food etc.^[1]

Facial palsy due to the paralysis of facial nerve almost shows the symptoms of *Ardita*. So we can correlate this disease up to some extent. Paralysis of the facial nerve may be of the upper motor neuron type or lower motor neuron type. The causes of facial palsy are compression of facial nerve by edema, periostitis at the facial canal, ischemia of the nerve or a viral infection. Commonly occurring facial palsy is Bells palsy, which is a lower motor neuron type. It usually develops suddenly and spontaneously due to idiopathic reasons. Paralysis of muscles of facial expression, weakness of pursing movements of lips, inability to hold water in mouth, deviation of the angle of the mouth to the normal side, incomplete closure of eyes and watering from the eyes, absence or decreased visibility of nasolabial fold etc. are the

Address for correspondence:

Dr Mridula M. K.

439G, Pocket 2, Mayur vihar phase 1

New Delhi 110091

E-mail: drmridulamk@yahoo.com

Submission Date : 14/06/2016

Accepted Date: 25/06/2016

Access this article online



Website: www.jaims.in

DOI: 10.21760/jaims.v1i1.3643

common symptoms. Since facial nerve carries sensations from lateral border of anterior two third of tongue it is also affected.^[2]

Approximately 7 to 12% of patient develops recurrent type of bells palsy. About 10% of patients are left with poor improvement of condition with allopathic management. Major complications of the condition are chronic loss of taste, chronic facial spasm, facial pain and corneal infections. The oral medications prescribed for patients of facial palsy are steroids, which in turn causes severe side effects. People who are obese, have uncontrolled diabetes, or cannot tolerate steroids might be at higher risk for complications with steroid use.^[3]

In Ayurveda, treatment described for *Ardita* is safe and effective. The treatment provides strength to facial muscles, strengthens the nerves, improve the blood circulation and there will not be any recurrence of the disease. As per Acharya Vagbhata and Charaka, *Ardita* requires a nourishing type of therapy. Treatment principle is '*Ardhitha navanam moordhini thailam tarpana mevacha ! Nadi sweda upanahasch apyanoopa pisithair hitha !!*'^[4] *Nasya Karma, Moordha Taila* (application of oil to the head), *Tarpana Kriya* with medicated oil to the eyes and ears, *Nadi Sweda, Upanaha Sweda* are included in the treatment principle of *Ardita*.

According to Acharya Sushruta, '*Ardhita aturam balavantham atmavantam upakaranavantham cha ! Vatavyadhi vidhanena upacharet vaisesikascha masthiskya sirobasthi nasya dhoomopanaha sneha nadi sweda adibhi!!*'^[5]

CASE DETAILS

A 66 year, old male patient, known case of Diabetes and Hypertension since 7 years was taken for the study. In a winter morning when he woke up from the bed, noticed a weakness in right side of face. Also right side of the mouth was deviated to opposite side, with difficulty in chewing and holding water in the mouth. He could not close the right eye completely. He noticed watering from the right eye also. He consulted an allopathic doctor and took a steroid

therapy for 10 days. The problems persisted even after allopathic treatments and visited our clinic to take Ayurveda treatment. Symptoms persisted in the same severity even after 10 days of allopathic treatments. Considering the symptoms we diagnosed it as a case of *Arditam*. Symptoms are given below

1. Difficulty in wrinkling of forehead in right side.
2. Cannot raise the eyebrows of right side.
3. Difficulty in complete closure of right eye.
4. Watering from right eye.
5. Weakness of muscles in right side of face.
6. Angle of mouth deviated to left side.
7. Dribbling of saliva through right side of mouth.
8. Decreased visibility of nasolabial fold in right side.

A facial nerve function grading by House-Brookman grading measures was used to assess outcomes.^[6] As per this grading system, we considered it as a moderately severe case of *Ardita*. Treatment was conducted in two courses,

Course One: (17 days)

Day 1 to day 3: (for 3 days)

Considering the *Amavastha*, we adopted thalam and lepam (with *Rasnadi Churna* and *Nimbamrutadi Eranda* for 1hr) along with *Mukhaabyanga* (using *Arka Patra (Calotropis gigantea)*, smeared with *Karpasasthyadi Taila* for 30 min) and *Kavala* (with luke warm water).

Day 4 to day 10: (for 7 days)

Pratimarsa Nasya with *Karpasasthyadi Chikkana Pakam*. As a preparatory procedure *Mukhaabyanga* (using *Arka Patra* smeared with *Karpasasthyadi Taila*) was done for 30 minutes followed with *Ksheera Dhuma* (with *Ksheerapaka* of *Vacha (Acorus calamus)* and *Bala (Sida cordifolia)*. After *Nasya, Dhoomapana* [with *Varti* prepared out of *Haridra (Curcuma longa)*, *Karpooora (Cinnamomum camphora)* and ghee] and *Kavala* (with luke warm water) was done.

Day 11 to day 17: (for 7 days)

Mukhaabyanga (using *Arka Patra* smeared with *Karpasasthyadi Taila* for 30min) and *Anna lepanam* with *Njavara* rice followed with *Kavala* (luke warm water).

During the entire course of treatment he was taking *Dhanadanayanadi Kashayam* and *Kaisora Guggulu*, *Rheumalaya forte* twice daily. After 17 days of treatment he was advised to continue the internal medicines, facial exercise and *Mukhaabyanga* with *Bala Taila* for a period of 14 days.

After course one, we observed the following symptomatic changes in patient,

1. Appeared wrinkles.
2. Complete closure of right eye.
3. Watering from eye was reduced, but slight itching appeared.
4. Facial muscle strength was improved.
5. Normal symmetry of face.
6. No dribbling of saliva.
7. Slight visibility of nasolabial fold.

Course Two: (14 days)**Day 1 to day 7: (for 7 days)**

Repeated *Pratimarsa Nasya* of the first course. Also done *Netra Kshalana* (with *Triphala Kwatha*) and *Aschyotana* (with *Jeevantyadi Ghrita*).

Day 8 to day 14: (for 7 days)

Shiro Dhara (with *Mahamasha Tailam* for 45min). Continued *Netra Kshalana* and *Aschyotana*.

After 14 days of treatment patient was advised to continue the internal medicines, facial exercises *Mukhaabyanga* with *Bala Taila*, *Netra Kshalana* with *Triphala Kwatha* and *Aschyotana* with *Jeevantyadi Ghrita* for a period of another 14 days.

After course Two, we observed the following symptomatic changes in patient,

1. Normal symmetry of face.

2. Complete strength and control of facial muscles.
3. Complete closure of eyes with no irritation and watering.
4. Was able to hold water in mouth and there was no dribbling of saliva.
5. Was able to wrinkle the forehead and raise the eyebrows.

Patient was reviewed after 14 days. He was perfectly normal, but was advised to continue the facial exercises, *Mukhaabyanga* with *Bala Taila*, *Netra Kshalana* with *Triphala Kwatha* and *Aschyotana* with *Jeevantyadi Ghrita* for 3 months. He came for a review after three months and was perfectly healthy.

DISCUSSION

In Facial palsy, facial nerve dysfunction leads to facial muscle paralysis with impairment of both sensory and motor functions. *Ardita* is a disease caused by vitiated *Vata*. *Vata* is responsible for all activities of body. So sensory and motor activities can be attained by normalcy of *Vata*. Here we adopted *Brimhana* type of treatment for correcting the vitiated *Vata* as per Ayurvedic treatment principles. It improved the motor function by stimulating and strengthening the facial nerves and muscles. The internal medicines selected were *Vatavyadhi Shamana* drugs.

The treatment started with *Amapachana* as a general line of treatment. *Thalam* and *Lepam* was performed for this purpose. The drugs selected for the treatment were *Nimbamruthadi Eranda Thailam* and *Rasnadi Choornam* which has anti inflammatory properties.

Abhyanga stimulate the nerves. It gave passive exercises to muscles there by strengthening them. The gentle pressure used during massage relaxes the muscles. It also provides the sensory motor integrity. Here *Karpasasthyadi Taila*, which is indicated in *Ardita*, was selected. *Swedana* liquifies the deranged *Doshas* and facilitate their expulsion by subsequent Panchakarma procedures. Here we adopted *Ksheeradhuma* with *Bala* and *Vacha* considering their properties.

Nasya is indicated in all *Jatrudha Vikaras*. Ayurveda says nose is the gateway of *Shiras* (head). *Nasya* stimulates the higher centres of brain. The drug administered enters into the systemic circulation and intracranial region by vascular and lymphatic path, thereby providing nourishment. Here we selected *Karpasasthyadi Chikkana Paka*, which is again indicated in *Ardita*. After *Nasya*, *Dhumapana* and *Kavala* was done for clearing the remaining *Doshas*. *Annalepana* with *Njavara* rice was done as a *Brimhana* therapy. Massage, heat and pressure during this procedure give nourishment to muscles and nerve endings. *Shirodhara* is one among *Murdha Taila*, which is indicated in *Ardita*. It pacifies *Vata*. Constant flow of liquid in a specified manner relaxes, calms and tranquillizes the patient.

CONCLUSION

The patient was evaluated and treated according to Ayurvedic principles. From the study we can conclude that *Ardita* can be successfully managed by Ayurvedic treatment with lesser chance of recurrence and without any side effects. The grading done according to modern principles also matched very well with the results. Moderately severe grading (grade 4) done according to house- brookmans scale was reduced to normal (grade 1) stage.

REFERENCES

1. Vagbhata, Astanga Hridayam, Text with English translation and notes, Translated by Prof.K. R. Srikanta

Murthy, Vol.2, Chikitsa Stana, reprinted edition, Chowkambha Krishnadas Academy, Varanasi. 2013:505.

2. KV Krishnadas, Textbook of Medicine, Fourth edition, Vol.2, Reprinted edition, Jaypee Brothers Medical Publishers, New Delhi. 2004:942.
3. Gautam Srivastava, Essentials of Oral Medicine , 1st edition, Jaypee Brothers Medical Publishers, New Delhi. 2008: 220.
4. Agnivesa, Charaka Samhita, Text with English translation and critical exposition based on Chakrapani Dutta's Ayurveda Deepika by Dr. Ram Karan Sharma & Vaidya Bhaagvan Dash, Vol.5, Chikitsa sthana, reprint edition, Chaukhambha Sanskrit Series, Varanasi. 2004:31.
5. Sushruta, Susruta Samhitha with English translation of text and Dalhanas commentary edited and translated by PriyaVrat Sharma, Vol.2, Chikitsa Stana, reprint edition, Chowkambha Visvabharathi, Varanasi. 2005:321.
6. House-Brackmann score- Wikipedia, the free encyclopedia, https://en.wikipedia.org/wiki/House%E2%80%93Brackmann_score.

How to cite this article: Mridula MK, Aswathi AT. Ayurvedic Management of Ardita - A Case Report. J Ayurveda Integr Med Sci 2016;1(1):87-90. <http://dx.doi.org/10.21760/jaims.v1i1.3643>

Source of Support: Nil, **Conflict of Interest:** None declared.
