

ISSN 2456-3110 Vol 2 · Issue 2 Mar-Apr 2017

# Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in







# A controlled clinical study on the efficacy of *Khadira Churna Pratisarana* with *Madhu* in management of *Mukhapaka* (Stomatitis) in Children

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# ABSTRACT

*Mukhapaka* in children is prevalent all over the world. It refers to an oral disease which occurs in two ways former one occures independently (*Swantantrarogam*) and latter occurs in association with (*Anubandhirogam*) other diseases like *Grahani*. It occurs due to Vit B<sub>12</sub> deficiency, folate deficiency, leukemia, inflammatory bowel disease, stress, illness, dietary triggers. Nutritional deficiency etc. *Mukhapaka* is found in those with poor oral hygiene. In *Mukhapaka Vata* is moving through out the interior of mouth gives rise to ulcers which shift in different place of oral cavity. Dry makes lips coppery red. Tongue become intolerant to cold, feels heavy, cracked and feels as though full of thrones there is difficulty to open the mouth i.e. *Mukhapaka*. In present era, world is looking at Ayurveda with the hope that it is going to provide good asset to the treatment of ailing humanity. *Sarvasaramukharogas* are named as *Mukhapaka*, as it occurs by spreading completely in the *Mukha*. *Mukharogas* occurs due to intake of unwholesome food, curd, milk, fermented gruel, not cleaning the teeth daily, improper administration of inhalation, emesis, gargles and venesection etc.

Key words: Mukhapaka, Stomatitis, Khadir Churna, Pratisarana.

#### **INTRODUCTION**

The symptoms of *Mukhapaka* are ulcerations, difficulty to open mouth, coppery red and looseness of the skin, the tongue become intolerant to cold, burning sensation, bitter taste in mouth, itching etc.<sup>[1]</sup> The *Lakshanas* of *Mukhapaka* can be co-related to the symptoms of recurrent ulcerative stomatitis. In case of adult's inability to take enough food for a couple of day may not be considered as a big issue, but in children it decrease in nourishment due to lesser

Address for correspondence: Mohsin P. Tamboli Post Graduate Scholar, Dept. of Kaumarabrutya, Parul Institute of Ayurveda, Limbda, Vadodara. E-mail: drmohseen786@gmail.com Submission Date : 30/03/2017 Accepted Date: 28/04/2017 Access this article online Quick Response Code Website: www.jaims.in DOI: 10.21760/jaims.v2i2.7706 intake of food during *Mukhapaka*, does result in loss of growth, therefore it is very important that *Mukhapaka* in children be cured at the earliest possible. *Sarvasara Mukharogas* are named as *Mukhapaka*, as it occurs by spreading completely in the *Mukha*.<sup>[2]</sup> *Mukha Rogas* occurs due to intake of unwholesome food, curd, milk, fermented gruel, not cleaning the teeth daily, improper administration of inhalation, emesis, gargles and venesection etc.<sup>[3]</sup>

The Ayurvedic Samprapti of Mukhapaka, It reveals involvement of Vata, Pitta, Kapha and Rakta Doshas. Ayurvedic Medicine is economical, cost effective and very much helpful to break pathogenesis with relief of sign and symptoms, gradually preventing complications. In the classical reference Khadira is one of the drug mentioned for its effectiveness in Mukhapaka and which is easily available.<sup>[4],[5]</sup>

#### **OBJECTIVE OF THE STUDY**

To compare the efficacy of *Khadira Churna Pratisarana* with *Madhu* in management of *Mukhapaka* (stomatitis). Mohsin P. Tamboli et.al. Efficacy of Khadira Churna Pratisarana with Madhu in Mukhapaka (Stomatitis).

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#### **MATERIALS AND METHODS**

#### Trial Drug: Khadira Churna + Madhu.

Dravya	Rasa	Guna	Doshagnata
Khadira	Tikta, Kashaya	Laghu, Ruksha	Kapha-Pitta Shamaka
Madhu	Madhura, Kashaya	Ruksha, Laghu,Yogavahi	Tridoshagna

Control Drug: Tannic acid and Choline salicylate

#### **Patients**

Patients visiting to Parul Institute of Ayurveda Hospital, OPD of *Kaumarbhritya* are selected in the study with written informed consent from the parents.

#### Methodology

Simple Random Sampling Method was conducted in Group A and Group B. Each group consist of 20 patients.

#### **Inclusion Criteria**

- Patients with signs and symptoms of Mukhapaka.
- Salivation
- Irritability
- Difficulty in deglutition
- Both Male and Female sex
- Age of 5-12 year

#### **Exclusion Criteria**

- Patients suffering from Traumatic stomatitis, Infective Stomatitis were excluded from study.
- Mukhapaka with associated systemic diseases were excluded.
- Age less than 5 year and greater than 12 year were excluded.

#### **Group and Posology**

	Group - A (Study Group)	Group - B (Control Group)
Drug	Khadira Churna with Madhu	Tannic acid and Choline Salicylate

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Reference	Su. Ch.22/69-71	-
Dose	2g. <i>Khadira Churna</i> + 5ml <i>Madhu</i> oral application.	0.5 ml each side of mouth.
No. of Patient	20	20
Duration	14 day	14 day
Time of administration	Three time in a day	Three time in a day
Observation	1 <sup>st</sup> ,3 <sup>rd</sup> ,5 <sup>th</sup> ,7 <sup>th</sup> ,10 <sup>th</sup> , 12 <sup>th</sup> ,14 <sup>th</sup> day	1 <sup>st</sup> ,3 <sup>rd</sup> ,5 <sup>th</sup> ,7 <sup>th</sup> ,10 <sup>th</sup> ,12 <sup>th</sup> ,14 <sup>th</sup> day

#### Route of administration

Locally applied in oral cavity, after excessive salivation takes place, spitt out saliva.

#### Followup

After completion of treatment patient will be followed up weekly for 2 week to observe re-currence of *Mukhapaka*.

#### **Criteria for Assessment**

The signs and symptoms were assessed by adopting suitable scoring method. The assessment was totally based on subjective criteria after clinical observation and information given by patient's mother. The subjective gradation of symptoms was done as follows.

1. Ulceration

Grade	Number of ulcer
0	Absent
1	1 to 3 ulcers
2	4 to 7 ulcers
3	More than 7 ulcers

2. Excessive salivation

Grade	Assessment
0	No complaint
1	Complains of salivation
2	Collection of saliva in mouth
3	Dribbling of saliva

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#### 3. Pain

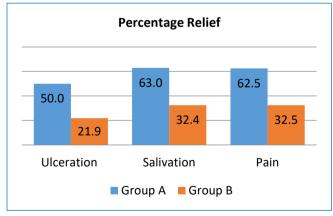
Criteria	Assessment	
0	No pain	
1	Occasional pain	
2	Pain while intake of cold food material	
3	Continuous pain with and without food and water contact.	

#### **Overall effect of therapy**

For comparison between Group A and Group B, Mann Whitney U test was used. From above table we can observe that P - Values for all parameters are greater than 0.05, hence we conclude that there is no significant difference between Group A and Group B.

Parameter	Group A	Group B
Ulceration	50.0%	21.9%
Salivation	63.0%	32.4%
Pain	62.5%	32.5%

#### Graph 1: Showing the precentage relief.



#### DISCUSSION

Khadira is Tikta Rasa Pradhana, Pitta-Kapha Shamaka, Vrana-Ropaka, Rakta Prasadaka (Bha. Pra.). Madhu is having qualities like Kashaya Rasa Pradhana, Vranya, Dahashamaka, Sandhankara, Kapha-Pitta Shamaka.<sup>[6]</sup> Cummulatively Khadira shows the action of Pitta Kapha Shamana, Rakta Prasadana, which is achieved to cure *Mukhapaka* (stomatitis). So this drug is wisely balanced from the point of view of all *Doshas* to *Mukhapaka*. Because of its *Rakta Prasadana Guna* it reduces *Raktaja Dushti*, so it plays important role in *Mukhapaka*. This type of treatment is called as *Dosha Pratyanika Chikitsa*. Thus we can claim that both drug A and drug B are significantly efficacious in treatment of *Mukhapaka* (stomatitis) in children. Both group i.e. trial group and control group are significant. There was no re-occurrence of *Mukhapaka* in both group on the 21<sup>st</sup> and 28<sup>th</sup> day.

#### **CONCLUSION**

Mukhapaka in modern parlance has similarity with the stomatitis which is common mouth disorder. Khadira Churna is significantly effective in Mukhapaka (stomatitis) and is resolved faster without any complication. Signs and symptoms of Mukhapaka i.e. ulceration, excessive salivation, pain in mouth were also cured well in trial group. Improper personal hygiene, poor residential hygiene, poor living standards, unawareness about health are important etiological factors for infestation of Mukhapaka. Involvement of Kaphaja Lakshanas were more prevalent in the disease Mukhapaka. The results found with Khadira Churna and Madhu ware encouraging and it was not associated with any side effect, so it can be used routinely in everyday practice for faster and safe recovery.

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# ORIGINAL ARTICLE Mar-Apr 2017

Mohsin P. Tamboli et.al. Efficacy of Khadira Churna Pratisarana with Madhu in Mukhapaka (Stomatitis).

## ISSN: 2456-3110

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**How to cite this article:** Mohsin P. Tamboli, Sunil Changle, Purnima Hope. A controlled clinical study on the efficacy of *Khadira Churna Pratisarana* with *Madhu* in management of *Mukhapaka* (Stomatitis) in Children. J Ayurveda Integr Med Sci 2017;2:73-76. http://dx.doi.org/10.21760/jaims.v2i2.7706

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

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