



**EFFECT OF NASYA KARMA WITH KARPASHASTHADI TAILAM IN
ARDITA (BELL'S PALSY): A CASE STUDY**

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ABSTRACT

Nasya karma is one of the most important *Panchakarma* for the *Urdhwajatrugata roga*. As *Ardita* comes under *urdhwajatrugata roga*, *Nasya karma* is the choice of treatment. The *Ardita* comes under *Vata vyadhi* and therefore *snehana* is considered as the best therapeutic option. The *sneha* can be used in various forms depending on the condition, so *sneha* can also be used in the form of *Nasya* in *Ardita*, because *Nasya Karma* is believed to have a major role in the treatment of *Ardita*. Objective was to observe the efficacy of *Karpashastadi tailam nasya* in the management of *Ardita*. A 26 year old female patient presenting with sudden onset of asymmetry of face, mild pain and loss of movement on left side of face, difficulty in chewing and improper close of right eye come to OPD of Raghunath Ayurveda Mahavidyalaya and Hospital. History and examinations leads to the diagnosis of *Ardita* (Bell's palsy). So patient was treated according to principal of *Ardita chikitsa* i.e, *Nasya* with *Karpashastadi tailam*. A remarkable effect was observed in terms of clinical features. *Nasya karma* has been found to be potentially effective in recovery from *Ardita* in that case.

Keywords: *Ardita*, Bell's palsy, *Karpashastadi tailam*, *Nasya karma Dhanadhangyadi Kashaya*, *Ekangaveer Rasa*.

INTRODUCTION: *Ardita*, a *vatika* disorder is included among the 80 *Nanatmaja Vata Roga* by *Acharya Charaka*¹ and *Vagbhata*. *Vagbhata* has stated that *Ardita* results by the vitiation of *Pranavata*. *Charaka* has mentioned *Avyakta Lakshana* (latent features) as the Prodromal symptom of all *Vata Vyadhis*². All the causative factors which are mentioned as- carrying heavy weight on head, excessive yawning-laughing, shouting loudly, pregnant female, fear and grief elevate *Vata*. which then gets localized in head, nose, lips, chin, forehead, eyes and causes deviation of half side of face and neck and produce symptoms- Deviation of angle of mouth , absence of

blinking of eyelids, unable to sneeze, impaired tongue functions with slurred speech, impaired hearing along with pain in affected side of face³. *Acharya Sushruta* has described weakness, inability to close eyelids completely, consistent slurred speech, tremors and duration exceeding 15 days with those symptoms. The *Vata* vitiated by the earlier stated causative factors, settles in the regions of head, nose, chin, forehead and the eyes and produces the disease called *Ardita Vata*. The symptom of *Vaksanga* (Difficulty in speaking) indicates that the vitiated *Vata* affects the tongue also. *Vagbhata* has indicated the affliction of the ear on the affected side. The features of

incurability of *Ardita* are *Ksheena* (debilitated), *Animeshaksha* (unable to close the eyes), *Avyakta Bhashina* (whose speech gets obstructed constantly), *Trivarsha* and *Vepana* (tremors). *Trivarsha* is suggestive of two things either the disease is 3 years old or discharge from mouth, eyes and nose. According to signs and symptoms *Ardita* resembles Facial Paralysis. Facial nerve paralysis is a common problem that involves the paralysis of any structures innervated by the facial nerve⁴. Facial nerve paralysis is characterized by unilateral facial weakness, with other symptoms including loss of taste, hyperacusis, and decreased salivation and tear secretion. Symptoms may develop over several hours. Acute facial pain radiating from the ear may precede the onset of other symptoms. The incidence is around 23 per 100,000 people per year.

As per Ayurveda classics, the sign and symptoms of Bell's palsy simulate with *Ardita* which results due to aggravated *Vata Dosha*. Therefore the treatment principle given by *Aacharya Charaka* mainly concentrates on *Vata* pacification i.e. *Navan nasya* should be given⁵, *Murdhini taila*, *Nadi sweda* and *Upanaha* prepared with the meat of animals inhabiting marshy lands are useful for the cure of this ailment. Up to 30% of patients with Bell palsy fail to recover facial function completely. Thus, thousands of patients with Bell palsy are left with permanent, potentially disfiguring facial weakness each year. Modern science found drugs like steroids and anti viral etc. for it, also surgical and other treatments are available for facial paralysis. Yet, its recurrence is also reported. Acc. to Ayurveda Nose is said the gateway of cranial cavity⁶. And it is also said that all diseases of supraclavicular part can be managed by *Nasya karma*. Keeping in view

all the particular reasons, the case study had been carried out to analyze the effect of *Nasya Karma* (*Karpashastadi tailam*) along with *Shamana* therapy.

CASE REPORT:

A 26 year old female patient presented herself with sudden onset, asymmetry of face, loss of movement on left side of face, unable to speak clearly, difficulty in chewing and closing left eye with lacrimation from fifteen days duration. At the onset of presentation, she had not taken any treatment. Clinical examination revealed absence of right nasolabial fold, deviation of angle of mouth to the left, inability to close the right eye, inability to lift brow and asymmetry of face at rest. All these features suggested *Ardita* (facial nerve palsy).

Routine investigations done at pathology lab of Raghunath Ayurved Mahavidyalaya and Hospital, Contai, Purba Medinipur including Hb, TLC, DLC, ESR, RBS and LFT were within normal range. As per the principles of *Ardita chikitsa*, the patient was treated with

MATERIAL AND METHOD:

Both *sodhan* and *saman chikitsa* started on the day one comes on R. A. M. & H. OPD, Patient turned IPD for 1 month.

Sodhana chikitsa with Nasya:

1. *Poorva Karma* – *Snehana* (*Abhyanga*) with *Ksheerabala taila* followed by *Bastru Swedana* upto *samyaka snigdha* and *sinnya lakshana*.
2. *Pradhana Karma* – *Navana Nasya* with *Karpashastadi tailam*⁹ 8-8 drops each Nostril for 14 days.
3. *Paschat Karma* – *Kavala dharana* with warm saline water and *Dhoomapana*.

Shamana chikitsa with:-

- *Dhanadhanyadi Kashaya*¹⁰ 40 ml twice a day before food with half glass of water for 1 month
- *Ekangaveer Rasa*¹¹ 250mg BD for 1 month with *adraka swarasa*.

OBSERVATION AND RESULTS :

The recovery was estimated in terms of clinical features observed. An assessment criteria was designed based on the intensity of the clinical features. Table .1

Clinical feature	Grading	Before treatment	After treatment	% Relief
<i>Vaktrardhavakra</i> (deviation)	Normal	0	3	67%
	Persistent but do not disturb routine work -	1		
	Persistent disturb routine work	2		
	Complete <i>Mukhavakrata</i>	3		
<i>Vaksanga</i>	Complete <i>Vaksanga</i>	3	1	100%
	Pronouncing with great efforts	2		
	Slurred speech	1		
	Normal speech (whistling)	0		
<i>Bhruvikriti</i> (moving up left eyebrow)	No up left eyebrow	3	3	100%
	up left eyebrow but no wrinkle present	2		
	up left eyebrow but mild wrinkle present	1		
	Normal	0		
<i>Lalasrava</i>	Constant (profuse) <i>Lalasrava</i>	3	2	100%
	Intermittent (moderate) <i>Lalasrava</i>	2		
	Partial (mild) <i>Lalasrava</i>	1		
	No <i>Lalasrava</i>	0		
<i>Netra nimilon</i> (difficulty of closing left eye)	No persistent	0	2	50%
	improper closing of eye without lacrimation	1		
	improper closing of eye with lacrimation	2		
	improper closing of eye with lacrimation and burning sensation	3		

After 14 days of therapy there was significant improvement in the clinical features like-

Vaktrardhavakra (deviation)- 67%

Vaksanga – 100%

Bhruvikriti (moving up left eyebrow)-100%

Lalasrava-100%

Netra nimilon (difficulty of closing left eye)- 50%

There was no side effect observed during the treatment as well as after the completion of treatment.

DISCUSSION:

Nasya karma is one among the five types of *Panchakarma* therapies. According to

Ayurveda, before giving *Nasya*, patient should receive *Snehana* and *Swedana* because modern studies had proved that application of heat and muscular exercise accelerates drug absorption through vascular path by increasing blood flow. Moreover *KsheeraBala taila Abhyanga* followed by *Swedana* stimulates the sensory nerve endings and provide strength to the facial muscles by their *Balya*, *Ushna*, and *Vatahara guna*.

Karpashastadi tailam is prepared with *karpash asthi*, *balamula*, *kulattha*, *masha Kashaya* with *Taila* After it is prepared, this *taila* is again processed with the above ingredients for repeated times in *mridu paka*. It is prescribed in all *vata* disorders and having *Jeevana*, *Brihana*, *Rasayana* and *Indriyaprasadana* properties.

The synergistic action of all the components thus may have potentiated its neuroprotective effect. As nose is the gate way of *Shiras*. So the drugs administrated through nose stimulate the higher centers of brain which shows action on regulation of nervous system functions⁷. Therefore *Navan nasya* with *Karpashastadi tailam* alleviates the vitiated *vata dosha* and provides nourishment to the nervous system thereby helps in improving the symptoms of Bell's palsy. In *Paschat Karma*, *Kavala dharana* with warm saline water increases the efficacy of the treatment as well as removes remaining *Doshas* and helps in improving the facial muscle strength As per *Sahastrayoga*⁸; *Dandhanyadi Kashaya*¹⁰ is indicated in *Ardita* management. *Dandhanyadi Kashaya* is having *Vata Shamaka* and *Sothahara* properties and thus alleviates pain and inflammation. *Ekangveer*

*rasa*¹¹ has *Atyanta teekshna*, *Brimhan*, *rasayana* effect and also effect of balancing *Vata* and *Kapha Dosha* which helps in enhancement of recovery of patients from *Ardita*. On the basis of these properties, it helps in relieving the symptoms of Bell's palsy.

CONCLUSION:

This case study reveals that patients of *Ardita* (Bell's palsy) can gain significant relief in symptoms with minimal risk and high acceptance through Ayurveda management. Despite the limitations of this case study, the therapy may be an effective option in the treatment of Bell's palsy. Further study should be carried out in larger sample group.

REFERENCES:

1. Acharya,Vaidya Jadavji Trikamji:Charak Samhita by Agnivesa ,Revised by Charak and Didhaval with the Ayurveda –Dipika Commentary of Chakrapanidatta ,Chaukhamba Prakashan,Varanasi,Reprint Edition ,2013;sutra sthan-20/11,page-113.
2. Acharya,Vaidya Jadavji Trikamji:Charak Samhita by Agnivesa ,Revised by Charak and Didhaval with the Ayurveda –Dipika Commentary of Chakrapanidatta ,Chaukhamba Prakashan,Varanasi,Reprint Edition ,2013;Chikitsa sthan-28/19,page-617.
3. Acharya,Vaidya Jadavji Trikamji:Charak Samhita by Agnivesa ,Revised by Charak and Didhaval with the Ayurveda –Dipika Commentary of Chakrapanidatta ,Chaukhamba Prakashan,Varanasi,Reprint Edition ,2013;Siddhi sthan-28/40,page-618.
4. Anthony G Marson, Rodrigo Salinas, Bell's palsy, West J Med. 2000 Oct; 173 (4):266-268, (cited 2015 Aug13)

5. Acharya,Vaidya Jadavji Trikamji:Charak Samhita by Agnivesa ,Revised by Charak and Didhaval with the Ayurveda -Dipika Commentary of Chakrapanidatta ,Chaukhamba Prakashan,Varanasi,Reprint Edition ,2013;Siddhi chikitsa-28/21,page-621.
6. .Vagbhatta,Astanga Hridaya,commentary by arunadatta and hemadri, edited by pt. Hari Sadasiva Sastri Paradakara, sutrasthan, Nasya vidhi Adhyay,Chapter-20,Sloke-1;Reprint Edition,Chaukhamba Sanskrit Sansthan,Varanasi,2014 p287.
7. ABC of Ear, Nose and Throat- edited by Harold Ludman and Patrick J Bradley, 5th edition 2007,Blackwell Publishing Ltd., p. no. 35
8. K Y Srikanth et al, Pharmacodynamics of Nasya Karma, IJRAP, 2(1), Jan-Feb 2011 24-26, (cited 2015 March15)
9. R. Vidyanath, Sahasrayogam, 2nd edition 2008, Chaukhamba Sanskrit series office, Varanasi, page no-118.
10. Dr. K Nishteswar and Dr. R. Vidyanath, Sahasrayogam, Arditakshepaka vata harakashaya, 4th edition 2014, Chaukhamba Sanskrit series office, Varanasi, page no-45.
11. Rasatantrasara and siddha proyaga, 25th edition 2015, Krishna gopal ayurveda bhawan vol-1, page-235.

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