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Case Study

# AN INTEGRATED MANAGEMENT WITH *PANCHAKARMA* TOWARDS BELL'S PALSY Manmeet Kaur<sup>1</sup>, Pranesh P. Gaikwad<sup>2\*</sup>, Viraj Jadhav<sup>3</sup>

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#### ABSTRACT

*Ardita*, alias Bell's palsy in contemporary, causing anomaly of *Mukha ardha* (half face). Presentation of deviation of face is caused by paralysis of facial nerve. According to our *Acharyas* vitiated *Vaata* gets localized in half of the face. It is one of the 80 *Vaataj nanatajmaja vikaras* narrated by *Acharaya Charaka*. Accordingly, *Bruhana* (nourishing therapy) and *Vaatashamak* treatment was adopted. Currently integrated study was conducted to gaze out the effectiveness of *Panchakarma* along with Ayurvedic and allopathy oral medication in the acute case of bell's palsy. On perceiving the sign and symptoms idiopathic diagnosis was made of bell's palsy and the treatment was designated on the line of *Ardita chikitsa* given in our *Samhitas*. **Methodology:** in addition to patient already taking allopath medicines, *Sarvang snehana* with *Bala taila, Sarvang swedana* with *Dashmoola kwatha, Nasya* with *Indriyatarpan taila* and *Gandusha* with *Ksheerbala taila* along with Ayurvedic oral medication. Total 21 days this treatment protocol was followed. **Observation:** There was 80% depreciation in all sign and symptoms of patient. House Brackman grading was reduced from grade 4 to grade 2. **Conclusion:** This integrated treatment not only appeases vitiated *Vaata* but also gives nourishment to all the sense organs.

#### INTRODUCTION

Bell's palsy is an acute, acquired, nontraumatic, unilateral, infranuclear facial palsy. It involves the flaccid paresis of all facial mimetic muscles on the affected side <sup>[1]</sup>. It has a prevalence of 1 out of 60 to 70 or 23 cases 100,000/year. Facial nerve control number of tasks like closing and blink of eyes, flaring of nostrils, lacrimation, salivation, sensation of taste in anterior 2/3<sup>rd</sup> part of the tongue, frowning and raising eyebrows, these all are affected <sup>[2]</sup>. In Ayurvedic classics our *Acharyas* have described the same symptoms under the name *Ardita*. *Acharayas* securitize that vitiated *Vaata* primarily affect the half of the face but with some different interpretation. According to *Acharya Charaka*, *Acharya Vaghbhata* and *Acharya Sharanghdhar* depraved *Vaata* only effect half of the

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face with or without involvement of half of the body <sup>[3,4,5]</sup>. According to *Acharya Sushruta* only half of the face gets affected <sup>[6]</sup>. *Arundatta* further clarifies that whole body is affected by this disease but mainly face gets affected <sup>[7]</sup>. According to *Acharya Sushruta* the patient of *Ardita* who is strong, self-controlled should be treated with same measures as described in *Vaatika* disorders.

Modern system of medicines the treatment of bell's palsy is corticosteroids, antiviral agents and surgical treatment include-subocularis oculi fat lift, facial nerve decompression. These have tremendous result; however, it is not only cost ineffective but also show short term results. But in present case along with corticosteroids and antiviral taking drugs, Panchakarma therapy plus some Ayurvedic medicines (Shamana chikitsa) was given, which fabricate the present case peculiar. Panchakarma is believed to remove all the impurities of our body additionally offer nourishment to our biological structures for speedy recovery. Panchakarma advised was Saravang snehana with Ksheerbala taila, Sarvang swedana with

*Dashmoola kwath, Nasya* with *Indriyetarpan taila* and *Gandusha* with *Ksheerbala tail* + lukewarm water. Total 21 days treatment was given. Significant positive results were seen in a patient which will be discussed below with grading for better understanding.

### AIM AND OBJECTIVES

To evaluate the role of *Panchakarma* therapy along with Ayurvedic medicines with ongoing allopathy medication in acute case of Bell's palsy. (Integrated management)

### **Case Report**

A male patient of 58 years came to our O.P.D on 9-11-2022 having complaints of closing left eye completely, intermittent watering, deviation of face to **General Examination**  the right side, difficulty in swallowing because food gets trapped between teeth and gums, sometimes feeling of heaviness in face, these symptoms were present since 1 week.

**Past History:** After perceiving the full history of patient we come to know that prior to 10 days patient was having record of fever with severe cold symptoms. He also consulted to medical physician and started taking the course of corticosteroids and antiviral drugs with intermittent tapering of dose. Along with these he want Ayurvedic *Panchakarma* therapy for speedy recovery and strength so he visited O.P.D no.9 at D.Y. Patil college of Ayurved and research centre.

Temperature	A febrile	Mala	Smayaka		
Pulse	80/min	Mutra	Smayaka		
B.P 130/70 mm Hg		Jihva	Alpa sama		
P/A	Non tender	Kshudha	Prachiti		
Weight	73kg	Trishna	Samyaka		
Nadi	Vaata pradhanaj kapha	Nidra	Samyaka		

### **Personal History**

Diet- Mixed Addiction- No addiction Occupation- Principle of college Drug history- NAD Family history- NAD **RS**-NAD **CVS**-NAD

### CNS

- Consciousness- Fully alert
- Orientation- Person, place, intact
- Speech- Slightly slow and mumbled words
- Higher motor functions

### **Cranial Nerve Examination**

- Eyebrow raising- Not possible on left
- Frowning head- Difficulty in left side
- Eye closure- Left eye incomplete closure
- Teeth showing- Not on left side
- Nasolabial fold- Less on left side
- Taste perception- Fully present at 2/3<sup>rd</sup> of tongue

- Right UL-5/5
- RIGHT LL-5/5
- LEFT UL-5/5
- LEFT LL-5/5
- Dribbling of saliva- On left angle of mouth
- Bell's phenomenon- Left side
- Deviation of mouth- On right side
- Other deep reflexes such as ankle jerk, planter reflex are normal

On the basis of above findings, normal neurological examination with the exception of facial nerve, encountering the prescription made by medical physician, idiopathic diagnosis was made of *Ardita* (bell's palsy) and *Panchakarma* was planned.

# Presently patient taking medicines

Tab. Wysolone 20 mg T.D.S (intermittent reducing dose after 5 days)

- Tab. Acivir 400mg T.D.S (intermittent reducing dose after 5 days)
- Tab. Sompraz 40mg O.D (empty stomach morning)

Tab Felcita O.D (after breakfast)

Treatment Advised					
Panchakarma					
1.	Sarvang Snehana	Ksheerbala taila	Once in a day		
2.	Sarvang Svedana	Dashmoola Kwath	Once a day		
3.	Nasya	Indriyatarpana taila	6 droplets each nostril	21 days	
4.	Gandusha	Ksheerbala oil + lukewarm water	Twice a day		

Abhy	Abhyanter chikitsa (internally given medicines)				
S.no.	Medicine prescribed	Dose	Anupana	Timings	21 days
1.	Brihat vaat Chintamani rasa	60mg	Lukewarm water	Morning empty stomach	
2.	Ekangveer Rasa	60mg	Lukewarm water	Morning-evening after food	
3.	Dhanvanter arishta	20 ml	with equal amount of lukewarm water	Morning-evening after food	

## RESULT

Analysis of result was done on the examination of cardinal sign and symptoms and outcomes were assessed on the basis of House Brookman Grading system.<sup>[8]</sup>

Parameter	Grading	Before treatment	After 21 days	
Deviation of	1. Normal	Grade-5	Grade-2	
mouth on	2. Slight synkinesis			
right side	3. Obvious but not disfiguring facial symmetry			
	4. Disfiguring facial symmetry			
	5. Asymmetric facial appearance			
Left eye	1. Complete closure	Grade-4	Grade-1	
closure	2. Complete eyelid closure with minimum effort			
	3. Complete eyelid closure with maximum effort			
	4. Incomplete eyelid closure			
Unable to	1. No trapping	Grade-3	Grade-1	
chew from	2. Mild trapping			
left side due	<ol> <li>Trapped but easily removed by tongue</li> <li>Trapped needs manual removal</li> </ol>			
to trapping of food	4. Trapped needs manual removal			
Dribbling of	1. Dribbling absent	Grade-3	Grade-1	
saliva	2. Intermittent dribbling	Glaue-5	diade-1	
	3. Constant but mild dribbling			
	4. Constant but profuse dribbling			
Slurring of	1. Normal speech	Grade-3	Grade-1	
speech	2. Pronouncing words with mild efforts		(Almost normal	
	3. Pronouncing words with moderate efforts		speech)	
	4. Complete slurring		speccilj	
Nasolabial	1. Present normally	Grade-3	Grade-1	
fold	2. Present when attempting to speak			
	3. Present when attempting to smile			
	4. Never seen			
Smiling sign	1. Absent smiling sign	Grade-3	Grade-2	
	2. Seen without upward movement of right angle of			
	mouth			
	3. Seen with upward movement of right angle of mouth			
	4. Present all the time			
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#### DISCUSSION

In modern medication there is no as such size fit treatment for all cases of Bell's Palsy. But still commonly used medications are corticosteroids and anti-viral drugs with some muscle and nerve tonic.

According to Acharya Charaka and Vaghbhata the treatment modality should be of nourishing type <sup>[9]</sup>. As the Ardita is caused due to the Sthana sanshrya of vitiated Vaata dosha in any of the side of face according to the Acharya Charaka, Vaata dosha is the predominant culprit so the treatment adopted is Vaatahara. According to the Samprapti also due to Nidaana sevana vaata gets vitiated and this vitiated Vaata gets localized in Shira, Nasa, Hanu, Lalata, Netra.

#### **Probable Mode of Action**

Snehana Karma with Ksheerbala Taila gives strength to the facial muscles by stimulating sensory nerve endings and nourishes the *Shleshaka Kapha* <sup>[10]</sup>. The probable mode of action of *Ksheer bala taila* is analyzed by its *Rasa pachak*. All the three ingredients Bala, Kshira and Tila taila possess Madhur rasa and Vipaka. Madhur rasa mitigates both Vaata and Pitta dosha. It is Dhatunaam prablam (strength to the tissues) and is good for sensory organs and pleasing to mind (Shadindriyaprasadak). It nourishes the body (*Tarpavati*) and plays major role in promoting life (Jeevayati). It is having properties of Snigdha, Manda, Sukshama and Vyavayi, therefore it is said to pacify effects on all eighty chronic conditions of *Vaata* origin. Presence of antioxidants prevents the possible damage of neurons <sup>[11]</sup>.

Abhyanga provides Dridhata (tensile strength), Sutwaka (enhance quality of skin tissue), Prashanta Marutaabadha (pacifies Vaata disorders), Klesha vyayam sansaham (increase tolerability of physical exertion).<sup>[12]</sup>

Patient was given full body *Abyanga* followed by *Swedana* with *Dashmoola kwath*.

*Swedana* before the *Nasya* dilates the blood vessels which intensify local microcirculation. Increased blood flow to peripheral arteries helps in better drug absorption. It also provides strength to the facial muscles <sup>[13]</sup>. Collagen fibre extensibility will be increased with increase in temperature, pain threshold will also be increased which produces analgesic effect.<sup>[14]</sup>

Nasya with Indriyatarpan taila. Indriyatarpan taila is the formulatory medicine of of Sudhatatva Pharmacy of D.Y. Patil College of Ayurveda and Research Centre. It contains *Dravyas* which are having Katu, Ushana, Tikshana prominent Gunas. These Gunas mainly cause *Dravikarana* and *Chedhana* of vitiated *Doshas*. It contains Jyeshthamadha (Glycyrrhiza glabra), Pipplai (Piper longum), Usher (Vetveria zizanioidis),

Manjishtha (Rubia cordifolia), Punarnava (Boerhavia diffusa), Vidanga (Embelia ribes), Gokshur (Tribulus terrestris), Kantakari (Solanum xanthocarpum) and Tila tila. Jyeshthamadha is Vaata anulomana and provide strength to nerves of brain due to its Guru, Snigdha guna <sup>[15]</sup>. Pippali and Vidanga are Vaatahar and Medhya by reason of this it is used in Vaata vvadhi and *Mastikshya daurbalya* (mental infirmity) <sup>[16]</sup>. *Usheer* and Manjishtha gives strengthening and provide relaxation to nerves adding on to this they are Kapha nisarak due to Guru ruksha properties that help to clear micro and macro channels [17]. Punarnava is *Tridoshahara* <sup>[18]</sup> and *Gokshura* is *Vaat pitta shamak* <sup>[19]</sup>. Gandusha with Ksheerbala taila gives subsistence to mouth, helps to gain motor functions of facial muscles, by giving exercise to the facial muscles, strengthen the Hanu (jaw), enhance Rasavana (taste perception) and prevents Oshtha sphutana (cracking of lips) [20].

In Shaman chikitsa Brihat vaat chintamani ras which is the combination of many Bhasmas and is excellent rejuvenating medicine for nerves, mainly it acts as catalyst with other medicines [21]. *Ekangyeer ras* is Vaata doshahar, it relieves pain and stimulate under active and inactive nerves <sup>[22]</sup>. Dhanvantari Arishtam is indicated in Sarvang vaataj disorders and is excellent nerve rejuvenating tonic [23]. Corticosteroids have antiinflammatory action which diminishes oedema and inflammation of facial nerve, due to which the nerve will fit adequately within the bony corridor around it, this whole helps to regain facial movement faster. Role of Antiviral drugs in Bell's palsy is not exactly clear but its use with corticosteroids results to produce the significant results. Some studies reveal that because role of HSV-1 in aetiology of bell's palsy, antiviral drugs show positive results [24].

## CONCLUSION

From the present case study it can be concluded the patent with acute Bell's palsy taking modern line of treatment along with Ayurvedic formulations combined with *Panchakarma (Sarvang Snehana, Swedana, Nasya* and *Gandusha)* found significant effective in relieving symptoms and signs of the disease *Ardita* (bell's palsy). Integrated treatment appeases the vitiated *Vata* in the body and thus provide nourishment to the sense organs. Moreover, the drugs used internally and externally are having additional effect in relieving all the sign and symptoms. There was no side effects noticed during treatment and positive feedback was given by patient. In short Ayurveda proved its effectiveness and stood the test of time.

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