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# Integrated management of *Ardita* in 32 years old patient

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## ABSTRACT

Bell's palsy accounts for sixty to seventy-five percent of facial paralysis. It is described as acutely onset paresis. Either gender experiences it equally frequently. Although the incidence rises with age, it can affect any age group. In 6-8% of cases, a positive family history is present. Pregnant women and diabetics (angiopathy) are more at risk for Bell's palsy. In contemporary science, treatment options include vitamins, mast cell inhibitors, and steroids. It is associated with *Ardita*, *Vataja Nanatmaja Roga*, according to *Ayurveda*. In this study, a 32-year-old male patient presented with mouth deviation to the left, difficulty closing his right eye, ear pain, and headaches that had persisted for ten days at the *Shalaky* OPD of Dr. D.Y. Patil College of Ayurveda and Research Center in Pimpri, Pune. After a history and examination, Bell's palsy was the diagnosis. The patient received local treatment with *Netra Tarpana* therapy, *Swastika Sali Pinda Sweda*, *Nasya*, and *Shamana Chikitsa*, utilizing a variety of *Ayurvedic* formulations. The patient was also administered vitamins and allopathic steroids. All of the disease's symptoms and indicators improved, which was a remarkable outcome. Therefore, we are using an integrative approach in this study to manage Bell's palsy as soon as possible.

**Key words:** *Netra Tarpana therapy, Pinda Sweda, Shamana Chikitsa, Nasya, Ayurvedic formulations, Bell's palsy*

## INTRODUCTION

*Ayurveda* is one of the world's oldest medical sciences. *Ayurveda* is a combination of two words: "*Veda*" (knowledge) and "*Ayu*" (life). *Ayurveda* is a person's entire way of life, not just a method of treatment. Eight specialty branches make up *Ayurveda*. Thus, "*Ashtanga Ayurveda*" is another name for *Ayurveda*. Among them

is the *Shalaky Tantra*. *Urdha Jatrugata Roga* is the subject of *Shalaky Tantra*. "*Ardita*" is the word for someone who is troubled. As reported by *Shabdakalpdruma*.<sup>[1]</sup> While the *Vagbhatta* states that half of the face is affected, either with or without involvement of half of the body, the *Sushruta* states that the mouth and head are affected. *Vataj Nanatmaj Vyadhi* is described by *Acharya Charaka*, and *Ardita* is one of them<sup>[2]</sup> In *Charak, Susruta* and *Vagbhatta* we don't find types of *Ardita*. But *Acharya Bhavmishra*<sup>[3]</sup> mentioned the three types of *Ardita* that is *Vataja, Pittaja, Kaphaja*. Symptoms of *Ardita* are-

- Facial Weakness
- Impairment of taste
- Muscle twitching
- Ringing in one or both ears
- Difficulty in speech
- Pain and discomfort in jaw and behind the ears

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- Tremors in head
- And so on.

The majority of Bell's palsy symptoms and *Ardita* symptoms are extremely similar. Bell's palsy accounts for sixty to seventy-five percent of facial paralysis. It is described as acutely onset paresis. Either gender experiences it equally frequently. Although the incidence rises with age, it can affect any age group. In 6-8% of cases, a positive family history is present. Pregnant women and diabetics (angiopathy) are more at risk for Bell's palsy.

Clinical features of bell's palsy: Start is abrupt. The patient can't shut his eye. The eyeball turns up and out when you try to close it (Bell's phenomenon). The face starts to sag. From the eye, tears flow downward (epiphora). Ear pain may occur either before or after nerve paralysis. Some claim they have stapedial paralysis (noise intolerance) or chorda tympani involvement (taste loss). A person may be completely paralyzed or not. *Ardita* and Bell's palsy are related in relation to the symptom. Approximately 1 in 65 people will experience it in their lifetime. Global data suggest that approximately 0.02% of the population experiences this phenomenon. Thus, *Ardita* is a common illness in today's world. A suitable integration treatment must be found. Furthermore, there are numerous adverse effects connected to modern medicine. Therefore, it is necessary to find a treatment that works in both allopathy and *Ayurveda*. Therefore, the current study will be used to determine how best to control *Ardita*.

### Etiology

- Infection by virus the majority of the data points to the viral etiology of herpes simplex and herpes zoster. Bell's palsy is regarded as a component of the overall picture of polyneuropathy because it may also involve other cranial nerves.
- Vascular ischaemia: It could be secondary or primary. Both emotional stress and the cold can cause primary ischaemia. Primary ischaemia results in increased capillary permeability, which causes fluid to exude, edema to develop, and compression

of the nerve's microcirculation. Secondary ischaemia is the outcome of this.

- Hereditary: Due to a genetic predisposition, the fallopian canal is narrow, which puts the nerve at risk of early compression with even the smallest amount of oedema.
- Auto immune disorder

### AIMS AND OBJECTIVES

To evaluate the efficacy of Integrative approach in the management of *Ardita*.

### MATERIALS AND METHODS

On 28<sup>th</sup> December 2022, a Hindu male of 32 years old, visited to *Shalakya* OPD of Dr. D.Y Patil College of Ayurved and Research Centre, Pimpri, Pune with the complaints as cited below.

### CASE HISTORY

Patient, 32 years old, has been experiencing headaches and earaches for the past 10 days. She also has mouth deviation to the left and difficulty closing her right eye.

#### History of Present Illness:

Prior to two weeks, the patient appeared to be in good health. He gradually noticed a tilt to the left, heaviness in that area, trouble closing his right eye, and trouble raising his left eyebrow. The patient did not have hypertension or diabetes. The patient received treatment at another hospital and was given allopathic medication, but she did not get better. And subsequently, for the same reason, he went to the *Shalakya* OPD of the 'Dr. D.Y. Patil College of Ayurveda and Research Center in Pimpri, Pune' and began treatment there.

#### General Examination

Measuring 61 kg, 169 cm of height, 80 beats per minute-pulse, and 120/80 mm of mercury-BP

#### Personal History

Constipated bowel movement, irregular appetite, regular bowel movements, and sound sleep.

**Previous History**

No history of previous illness.

**Family History:** Father has a troubled past with DM Type 2.

**Central Nervous System Examination**

1. Unaffected Higher Motor Functions
2. Consciousness - Awareness
3. Orientation to an intact time, place, and person
4. Recent memory - unaffected
5. Complete Intelligence
6. Absent Hallucinations and Delusions
7. Muffled speech words

**Cranial Nerve Examination**

Except for the facial nerve, all other cranial nerves exhibit normal neurological and cerebellar examination function.

- a) Raising the eyebrows cannot be done on the right side.
- b) Eye closure: When the patient tries to close their right eyelid, their eyeball moves inward and upward and their eyelid closes partially. The Bell phenomenon
- c) Teeth exposing - the right side denture cannot accommodate this
- d) Right-side blowing of the cheek is not possible
- e) Nasolabial fold: Loss of the right side's Nasolabial fold.
- f) Dribbling of saliva: When eating from the right side, saliva dribbles on the right angle of the mouth and spills food.
- g) There is a bell phenomenon on the right side of the
- h) Mouth's departure to the left Deep reflexes like the plantar reflex, biceps, triceps, supinator, and knee jerk are all typical. All limbs' muscle tone and power are also normal.

**Ashta Sthana Pariksha**

- **Nadi:** 90 bpm
- **Mala:** Baddha Koshta
- **Mutra:** 5-6 times /day
- **Jihwa:** Alpa Liptata
- **Shabda:** Prakruta
- **Sparsha:** Twak Parishata and Krishnata over both arm and leg
- **Drik:** Prakruta
- **Akruti:** Madhyam

**Treatment Protocol**

- 1) Inj. Dexa 2 mg BD for day
- 2) Inj. Vitcofol
- 3) Tab free nerve
- 4) *Triphla Ghrith Netra Tarpan* for 14 days
- 5) *Shirbala Tail Nasya* 2 drops in each nostril daily for 14 days
- 6) *Shashti Shali Svedan - Mukh Pradesh*
- 7) Cap Palsineuron 1 cap BD for 14 days
- 8) *Evangveer Ras* 125 mg 1 tab bd for 14 days

**Assessment Criteria:** Assessment was done on the basis of gradation system.

**House-Brackmann facial paralysis scale**

Grade	Impairment
I	Normal
II	Mild dysfunction: normal symmetry when at rest, slight weakness
III	Moderate dysfunction: normal symmetry when at rest, noticeable but unidentifiable weakness with synkinesis Full eye closure with maximum effort and good movement of the forehead
IV	a dysfunction that is moderately severe (notable and disfiguring asymmetry, significant synkinesis) Not quite finished

V	severe dysfunction (movement hardly noticeable)
VI	complete paralysis, unable to move

## RESULT

Based on the scoring of observed symptoms and cardinal associated signs, an assessment was conducted. The results were evaluated using the House-Brookman grading measures for facial nerve function.

Parameter	Before	After 7 days	After 14 days
Deviation of mouth towards left side	Grade- 3	Grade- 2	75 percent less in value. Raising the eyebrows and frowning the forehead were possible when the face reverted to its normal symmetry.
Meal getting stuck between the gums and cheeks and being unable to chew from the right side	Grade- 3	Grade- 2	Chew easily from the right side
Improper blinking of right eye	Grade- 4	Grade 2 – occasionally blinks controlled	Right eyelid easily blinked, then closed complete
Slurred speech Complete slurring	Grade-3	Pronouncing with less efforts	Normal speech
Nasolabial fold	Absence of Nasolabial fold	Nasolabial fold seen while attempting to smile.	There is no nasolabial fold on the left side. Normally present nasolabial fold

## Mode of Action

1. *Swedana* eliminates *Gaurava*, *Sheeta*, and *Stambha*. *Swedana* produces perspiration, widens the *Srotas* (microchannels), aids in thorough cleansing of the *Srotas*, and transfers the adhering *Ama Dosha* to *Kostha*. *Khara*, *Ruksha*, and *Vishada* are characteristics of *Vayu*. Additionally, the attributes of *Sashtik Shali* are the opposite of *Vayu*, which are *Mridu/Manday*, *Shlakshna*, *Snigdha*, *Pichhila*, and *Shita*.
2. *Vyana Vayu* closes her eyes. *Snehana* is one method of treating *Vata*. One of *Bahya Snehana*'s methods is *Akshi Tarpana*. *Snigdha Guna* of *Ghruta* calms *Ruksha Guna* of *Vata*. *Triphala Ghruta* is also beneficial to the eyes. The *Triphala Ghruta*'s contents, including *Snigdha*, *Vatashamaka*, *Balya*, *Bruhana*, *Tarpana*, and *Rasayana*, are all beneficial for the eyes. *Aalochaka Pitta*'s sheet is *Netraindriya*. *Ghruta* is good in *Vatapitta Shamana* because it has *Madhur Rasa*, *Madhur Vipaka*, and *Sheeta Virya*.
3. *Ksheerbala Tail* strengthens the facial muscles and feeds the *Shleshaka Kapha*, which in turn stimulates the sensory nerve endings. The *Nasya Dravya* remedy cures the vitiated *Dosha* by traveling to *Sringataka Marma* and spreading into different *Srotas* (vessels and nerves).
4. When taken orally, *Ekangaveera Rasa* functions as *Brinhana*, *Rasayana*, and *Vishaghna*, aiding in the patients' faster rate of recuperation.
5. The results of the study demonstrated that Bell's palsy patients' paralyzed side of the face can move more freely thanks to steroid treatment. Its anti-inflammatory mechanism of action lessens facial nerve inflammation and oedema in cases of acute Bell's palsy.
6. *Vitcofol* gives the body the resources it needs to repair damage to the facial nerve and myelin sheath.

## CONCLUSION

Although this is only one case study, it may offer some hope for developing an integrated standard protocol

for the management of *Ardita*. However, more in-depth research with a bigger sample size is required to create the standard operating procedure for the illness. Based on this clinical case study, future researchers may investigate integrative line-up treatment.

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