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A case report of Ayurvedic management on *Dantavidradhi* w.s.r. to periodontal Abscess

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ABSTRACT

Background: *Aacharya Vagbhatta* has described seventy five *Mukhroga*; among them *Dantamoolgat Roga* are thirteen. *Dantavidradhi* (Periodontal Abscess) is one of the *Dantamoolgat Roga* can be correlated with periodontal Abscess. *Dantavidhi* (Periodontal Abscess) is *Tridoshaja*, *Sadhya Vyadhi* as swelling develops on gums and accomplished with pain, burning sensation, pus discharge and sometimes with blood stains. **Materials and Methods:** A 47 year old normal and oriented female patient attended *Shalaky Tantra* OPD at ITRA Hospital with complains of swelling on upper jaw gums (gingiva) as chief complain associated with pain during chewing, mild pus discharge since 12 days. She was diagnosed with *Dantavidradhi* (Periodontal Abscess) and treated by Ayurvedic management as orally *Triphala Guggulu*, *Gandusha* and *Kavala* with *Panchtiktak Kwatha*, *Pratisarana/Lepa* of *Katuki Churna* mixed with *Gomutra* locally and advised to maintain oral hygiene properly. **Observation and Result:** Considerable reduction of swelling is observed on the upper jaw gums (gingiva) within 8 days. Pain and pus discharge were relieved after 5 days. Complete relief in symptoms were noticed after 10 days. **Conclusion:** Ayurveda line of treatment approach is helpful in the management of *Dantavidradhi* (Periodontal Abscess).

Key words: *Dantamoolgat Roga*, *Dantavidradhi*, *Periodontal Abscess*

INTRODUCTION

As per modern science this stream can be correlated with E.N.T., Ophthalmology and Oro-Dentistry.

Aacharya Vagbhatta has described 75 (seventy-five) *Mukhroga*, among them *Dantamoolgat Roga* are (13) thirteen.^[1] *Dantavidradhi* (Periodontal Abscess) is of the *Dantamoolgat Roga* can be correlated with periodontal Abscess.

Dantavidradhi (Periodontal Abscess) is a swelling

develops on gums and accomplished with pain, burning sensation and heaviness. if ruptured after suppuration, it presents with pus discharge and sometimes with blood stains.^[2] It has two types: 2 (acc. to stages) i.e. *Ama & Pakwa Avastha*. *Aacharya Vagbhatta* has described treatments according to their stages in details. He had narrated about *Kaval*, *Lepa* and *Pratisarana* for *Amavastha* where else *Shastrakarma* advised in *Pakvavastha* with *Gandusha* and *Nasya*.

Periodontal Abscess is a localized accumulation of pus within the gingival wall of a periodontal pocket.^[3] Periodontal therapy divided in Non-Surgical^[4] and surgical Therapy^[5] The treatment of periodontal abscesses includes drainage, mechanical debridement, and mouth rinses, reserving antibiotic with anti-inflammatory therapy.

Nowadays Patients are going to aware about traditional medicines. The main aim of this case study to evaluate the efficacy of non-invasive ayurvedic treatment of periodontal disease.

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CASE HISTORY

A 47 year old well-oriented female patient attended *Shalaky Tantra* OPD at ITRA Hospital. Patient was healthy before 12 days, after that gradually she felt swelling over the upper jaw gums. on after 2-3 days, she felt pain during chewing and burning sensation. Gradually symptoms increase and she had mild pus discharge since 5 days. With the chief complains of Swelling on upper jaw gums (maxillary gingiva) since 12 days. Her associated complains were pain during chewing with mild pus discharge. After the complete examination of oral cavity she was diagnosed with *Dantavidradhi* (Periodontal Abscess)

MATERIALS AND METHODS

History

Past History: Covid-19 Positive 3 year ago

Systemic diseases: None

Medicinal History: Patient didn't take any medicines for current condition as she wanted ayurvedic treatment. No any current medication since 1 year.

Surgical History: None

Family History: None

Personal History:

- Aahar/Diet: Non Vegetarian
- Agani/Appetite: *Samyak*/ Normal
- Nindra/Sleep: sound sleep 6-7 hours
- Mutra/Urine: 5-6 t/D, 0-1 t/N
- Mala/Stool: satisfactory, 1 t/day
- Jihva: *Nirama*
- Shabda: *Prakrut*
- Druka: *Prakrut*
- Akroti: *Krish/Avar Prama*

Addiction: tea 2-3 t/d

Menstrual cycle: irregular (every 2-3 months), Scanty (1 pad/day, 3 days)

Samanya Parikasha / Vitals

- BP: 110/70 mmhg
- Pulse: 76/min
- RR: 20/min
- Temp: 97.2°F

On examination

Intra Oral Examination

Oral hygiene: Fair

Halitosis: present

Labial Mucosa: NAD

Buccal Mucosa: NAD

Tongue: NAD

Palate: NAD

Tooth examination

Saucer shaped abfraction of teeth

Missing teeth present at lower central incisors and right maxillary both premolars

Tooth mobility was absent

Gingiva examination (Figure no. 1)

Generalised Gum Recession

Swelling over gingiva i.r.t. 1st and 2nd incisors 1st quadrant (right upper maxillary)

Suppuration - Present

Pain on percussion,

No bleeding on probing

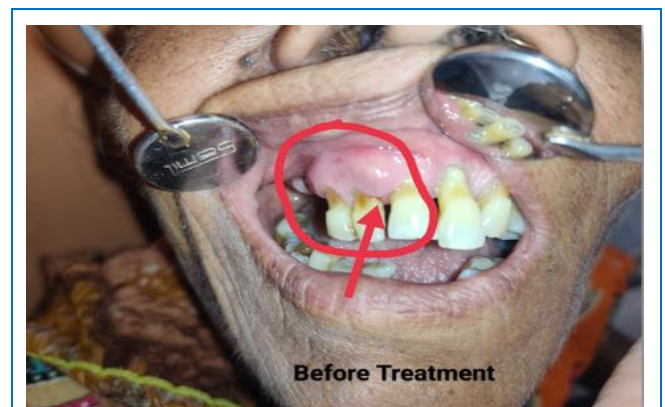


Figure 1: Before treatment



Figure 2: After treatment

Laboratory Investigations

Haematological investigations carried out for any other disease.

Result: Within normal limit

Therapeutic Intervention

1. Tab. *Triphala Guggulu* was advised orally 2 BD after meal with warm water
2. *Katuki Churna* for *Ptatisarana/Lepa* (Locally), 10-15 gms mixed with *Gomutra*
3. *Panchtiktak Kwatha* for *Kaval* and *Gandusha* BD before meal

Patient was also advice to maintain oral hygiene properly and follow the *Pathapathya*.

Pathya:

Aahar: *Laghu, Ushna, Tikta Katu Aahar Sevana, Mrudag, Shashishali* etc.

Vihara: *Dantadhana, Jihvanirlekhana, Kaval, Gandish* etc.

Apathya:

Aahar: *Madhur, Amla Rasasevan, Paya, Dadhi, Matsya Sevana* etc.

Vihara: *Dantadhavanadhesh, Anuchit Kaval* and *Gandush* etc

Follow up: Patient was under observation for next 10 days

OBSERVATION AND RESULTS

Reduction of swelling is observed on the upper jaw gums (gingiva) within 8 days. Pain and pus discharge were relieved after 5 days. Burning sensation and Heaviness subsided within 2 and 3 days respectively. Complete relief in symptoms were noticed after 10 days. (Figure no. 2)

DISCUSSION

Dosha are involved in *Dantavidradhi* are *Tridosha* with *Rakta* and *Mansa Dhatu* are vitiated. According to *Sadhyasadhya* it is included in *Sadhya Vyadhi*. *Aacharya Vagbhatta* has described two types of treatment according to *Avastha*.^[6]

Amavastha

- *Kavala* - A warm decoction of drugs of *Katu* (pungent), *Tikta* (bitter) and *Kashaya* (astringent) properties mixed with *Go-Mutra* (cow's urine) is used for *Kavala* (gargling).
- *Lepa* - with above mentioned ingredients.
- *Pratisarana* - Paste of *Katuka, Kushtha, Meshashrunji, Yavakshara* is applied on swelling.
- For preventing suppuration - *Ruksha* and *Sheeta* drug properties should be used systemically whereas *Sheeta Lepa* is applied externally/locally.

Pakvavastha

- *Shastrakarma* - Abscess, if develops, should be incised, and drained followed by cauterization if deeply seated.
- *Gandush* should be performed with decoction of *Triphala, Tulsi* and *Nimbi (Arishta)*.
- *Nasya* should be performed with *Ghrutamanda* processed with *Yashtimadhu*.

Treatment given in the present study was prescribed according to their reference in the Ayurveda classics in *Astang Sangaha Samhita*. *Triphala Guggulu* has *Haritaki, Bibhitaki, Amlaki* and *Guggulu* as the main ingredient of the classical formulation. It is best effective in inflammatory conditions. It has the ability to inhibit cellular accumulation and fluid exudation.

Triphala has *Tridosha Shamak* and *Rasayana* (rejuvenating) properties as well. *Panchtikta Kwatha* has been used for *Kaval & Gandusha*. i.e., group of barks of five trees - *Vata* (*Ficus bengalensis* L.), *Ashwatha* (*Ficus religiosa* L.), *Udumbara* (*Ficus glomerata* Roxb.), *Plaksha* (*Ficus lacor* Buch-Ham.), *Parish* (*Thespesia populenea* Soland. ex corea.). It is a drug with *Kashaya Rasa* (astringent taste) and by the action of the *Rasa*; it acts as a *Stambhaka* (arresting) and *Grahi* (that holds). It is *Kashaya Pradhana Rasa*, it also act as *Pitta Shamana* and *Rakta Shodhaka* (blood purifier). It's a good *Shothahara* (that which reduces swelling), due to the *Kashaya Rasa* of the drug it acts with *Peedana* (act of squeezing), *Ropana* (heal) and *Shodhana* (curative effect) property. Due to these properties, it destroys or liquefies the accumulated substances and hence minimizes the swelling. Furthermore, the drug is *Rooksha* (dry) and *Kaphahara*. Even due to this, *Shopha*, which is *Kaphaja*, gets reduced. Moreover, the *Lekhana* (scraping), *Kledahara* (arresting Dampness), *Chedana* (destroying/removing) and *Raktashodhaka* (blood purifier) properties of *Kashaya Rasa* also will facilitate the debridement of the slough. Which work as antimicrobial, and wound healing properties also.

Katuki Churna mixed with *Gomutra Ptatisarana/Lepa* (Locally) gave *Sodhana* effect which eliminate of sticky bio-film over gums and tooth area. And increase anti-oxidants activities. With this treatment protocol was helpful in *Samprapti Vighatna* of *Dantavidradhi* (Periodontal Abscess).

CONCLUSION

The entire Ayurvedic treatment selected for this case indicated *Kapha-Pitta Shamaka*, Anti-inflammatory, Antioxidant, and gingiva rehabilitation properties. Where no invasive strategy was utilized and in short

period marked improvement was achieved. Thus, we can conclude that Ayurveda *Chikitsa* is helpful in the management of *Dantavidradhi* (Periodontal Abscess).

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