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# Clinical evaluation of *Triphala Ghruta Akshitarpana* in the management of *Ardita* (Bell's Palsy)

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## ABSTRACT

*Ardita* is one of the *Vata Vyadhi*. Management of *Ardita* is same as *Vata Vyadhi*. It includes *Nasya*, *Murdhnitala*, *Basti*, *Karnapurana* and *Akshitarpana*. *Akshitarpana* is a unique procedure where medicated ghee is retained over the eyes for a specific amount of time. *Ardita* can be correlated with Bell's palsy. Symptoms like incomplete closure of eye, watering of eye, deviation of mouth, forehead creases loss, earache, dribbling of saliva, heaviness of face, taste loss, hyperacusis are same. In this study efficacy of *Akshitarpan* is evaluated in *Ardita*. *Triphala Ghruta* is selected to do *Akshitarpan*. Subjective criteria for assessment are watering of eye, deviation of mouth, forehead creases loss, earache, dribbling of saliva, heaviness of face, taste loss, hyperacusis. Total 30 patients were taken for study. Objective criteria for assessment is incomplete closure of eye. Accurate tests are applied to data. Study reveals that *Triphala Ghruta Akshitarpana* has effect on only 2 symptoms of *Ardita*. i.e. Incomplete closure of eye and watering of eye.

**Key words:** *Ardita*, Bell's Palsy, *Akshi Tarpana*, *Triphala Ghruta*.

## INTRODUCTION

*Ardita* is one of the *Vata Vyadhi*, It is caused due to vitiation of *Vata Dosha* by various reasons.<sup>[1,2]</sup> *Acharya Charaka* mentioned *Ardita* in one half part of body.<sup>[3]</sup> *Acharya Sushruta* describes *Ardita* which involves only *Urdhwanga* (above neck).<sup>[4]</sup> Bell's palsy (facial paralysis) is pathology of facial nerve having unknown etiology. Incidence rate is 1 in 60 or 70 persons in life time.<sup>[5]</sup> It can be correlated with Bell's palsy. Symptoms like *Akshinimilana Asamarthy* (incomplete closure of eye), *Ashrustrao* (watering of

eye), *Mukhavakrata* (deviation of mouth), *Kapalvalinash* (forehead creases loss), *Lalastrao* (dribbling of salavia), *Karnashula* (pain in ear), *Mukha Gauravata* (heaviness of face), *Rasadnyata* (tasteloss), *Ucchashruti* (hyperacusis) are same. When the eye health is at its best, we enjoy the colourful manifestation of the world. But when the eye gets clouded by one or the other disease, we fell that we have topped the list of cursed. So *Acharya Vagbhata* has advised to protect eye all time by *Nasya*, *Anjana* and *Tarpanadi Kriya*.<sup>[6]</sup> Management of *Ardita* is same as *Vata Vyadhi*.<sup>[7]</sup> It includes *Nasya*, *Murdhnitala*, *Basti*, *Karnapura* and *Akshi Tarpana*.<sup>[8-10]</sup> *Akshi Tarpana* is a unique procedure where medicated ghee is retained over the eyes for a specific amount of time.<sup>[11,12]</sup> *Triphala Ghruta* is *Netrya* i.e. good for eyes.<sup>[13]</sup> Aim of study was to see effect of *Triphala Ghruta Akshi Tarpana* in *Ardita*.

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## MATERIALS AND METHODS

**Patient selection** - 30 patient of *Ardita* were selected from OPD and IPD of Panchakarma Dept.

**Sampling technique** - Open randomized prospective uncontrolled clinical study.

### Inclusion Criteria

1. Age group between 14 to 60 yrs
2. Patients having signs and symptoms of *Ardita*
3. The first time to onset the disease
4. Patient who gave written consent.

### Exclusion Criteria

1. Patient having *Ardita* with another disease. Associated known conditions like DM, HTN, dental anaesthesia
2. Autoimmune disorders
3. Pregnant and lactating woman
4. Patients which is unable to take treatment upto 15 days
5. Congenital eye deformity
6. Patients suffering from carcinoma, TB, AIDS disease and other life threatening diseases

**Investigation** - BSL (fasting and pp), Haemogram, LFT, RFT, Lipid Profile.

**Drug selection and dosage** - *Triphala Ghruta*

### Method of preparation<sup>[14]</sup>

*Kwatha Dravya* - each 64 tola (640ml)

1. *Triphala*
2. *Bhringraj Swarasa*
3. *Vasa Swarasa*
4. goat milk
5. *Goghruta*

*Kalka* of following drugs - each 1 tola (10g.)

*Haritaki, Bhitaki, Aamalaki, Pippali, Sunthi, Maricha, Ashwagandha, Shatavari, Yashtimadhu, Daksha, Bala, Shweta Chandana, Kamala, Nilkamal, Punarnava, Daruharidra, Haridra Sharkara, Saidhava.*

Prior to preparation of *Triphala Ghruta*, *Ghruta Murchana* was prepared by taking *Amalaki, Bhibitaki, Haritaki, Nagarmotha, Haldi, Bijora Nimbu Swarasa.*

*Ghruta* was prepared as per classical reference, cooked well upto *Madhyam Paka*, sieved it and kept in safe content.

**Route of administration** - External

**Dose** - *Aapakshmaagrata* (upto the eyelashes)

**Kala** - *Prathakala* - morning

**Duration of study** -15 days

Follow up on 7<sup>th</sup> and 15<sup>th</sup> day.

### Method of administration

Requirement<sup>[15]</sup>

1. Patient table
2. 200 grams of black gram flour
3. About 200ml of clean water
4. 100ml of *Triphala Ghruta*
5. water bath to heat the ghee
6. Cotton wool
7. Dropper or spoon
8. Small probes of the six inches

### Purva Karma

1. Preparing the flour ring or cabinet - 200 grams of flour of black gram and water was mixed thoroughly in a sterile vessel. Thus prepared paste was thick enough to shape into any shape.
2. Making of frame around the eyes - paste was taken and rolled into a shape of an elongated hem.
3. Heating the ghee - *Triphala Ghruta* was heated till lukewarm in a water bath.

### Pradhana Karma

1. Position of the patient : The patient was made to sleep supine (on the back or facing the roof). He or she was given a neck support.
2. Construction of *Netra Tarpana* cabinet (ring) around the eye.

The rim was then placed around the one of the eyes touching the eyebrows above, nose medially,

maxillary prominence below and the lateral border of the orbit laterally. This whole rim was then properly stuck into the skin. For this a small portion of the rim touching the skin was pressed against the underlying skin with the help of a finger. This forms a firm frame around the eyes. So that the medicament didn't leak out of it. The height of the ring was of 2 angula's (1 angula = 1.75cm approx.).

3. Applying the ghee

Patient was asked to close his eyes. And then lukewarm ghee was poured with the help of dropper or spoon on to both eyes at its medial end, one after the other. Ghee was poured upto the eye lashes.

4. Closing and opening of eye

Once the ghee was poured over the eye, patient was asked to alternatively and gently open and closes his eyes just beneath the ghee and the procedure was continued for certain period.

**Paschat Karma**

1. Removing the medicine - The medicine was removed by creating a small hole in the lower portion of the wall of the flour ring at the outer angle of the eye and draining the contents in a bowl. Alternately, the wall of the ring was broken at the outer canthus (outer angle of the eye) and the contents were drained in a bowl
2. Wiping the eyes and the surrounding area - The medicines sticking to the eye and the sockets were swabbed out by wiping them off with the help of a sterile cotton pad or a tissue paper. Later the eye was wiped off gently with a sterile cloth dipped in warm water or the same cloth was used to give a gentle fomentation to the eye.

**CRITERIA OF ASSESSMENT**

**SUBJECTIVE CRITERIA**

**Watering of eye**

- 0 - absent
- 1 - 3 hr
- 2 - 6 hr
- 3 - 12 hr

- 4 - 18 hr

**Deviation of mouth**

- 0 - absent
- 1 - present

**Dribbling of saliva**

- 0 - absent
- 1 - present

**Forehead creases loss**

- 0 - absent
- 1 - present

**Heaviness of face**

- 0 - absent
- 1 - present

**Earache**

- 0 - absent
- 1 - present

**Taste loss**

- 0 - absent
- 1 - present

**Hyperacusis**

- 0 - absent
- 1 - present

**OBJECTIVE CRITERIA**

**Incomplete closure of eye**

Patient was asked to close eye. But patient could not close eye completely. Distance between upper eyelid and lower eyelid was measured by scale in milimeter.

**OBSERVATIONS AND RESULTS**

**Table 1: Patients having symptoms of Ardita**

SN	Criteria	No. of patients	%
1	Incomplete closure of eye	30	100
2	Watering of eye	30	100
3	Deviation of mouth	30	100

4	Forehead creases loss	30	100
5	Earache	16	53.34
6	Dribbling of saliva	10	33.34
7	Heaviness of face	9	30
8	Taste loss	0	0
9	Hyperacusis	0	0

1. Incomplete closure of eye is measured by scale. Sample size is small (n=30). It is quantitative data so paired t test was applied.
2. Watering of eye is qualitative data, so Wilcoxon signed rank test was applied.
3. We didn't get any results in deviation of mouth, forehead creases loss, earache, dribbling of saliva, heaviness of face. So data wasn't available to apply statistical test.
4. We didn't get any patients having taste loss and hyperacusis, so data wasn't available to apply statistical test.

**Table 2: Effect of Triphala Ghruta Akshitarpana on Incomplete closure of eye by paired t test.**

	7 <sup>th</sup> day (mid of treatment)	15 <sup>th</sup> day (after treatment)
X diff	2.17	4.24
SD diff	0.65	1.27
SE diff	0.1183	0.232
t	18.32	18.27
p	P< 0.001	P<0.001
Significant	Highly Significant	Highly significant
% R	45.45%	88.81%

**Table 3: Effect of Triphala Ghruta Akshitarpana on watering of eye by Wilcoxon Signed Rank Test.**

	7 <sup>th</sup> day (mid of treatment)	15 <sup>th</sup> day (after treatment)
Ranks	136 171	105 48 172
S.D.	79.54	37.17
Tt	171	325
Te	85.5	162.5
Z	1.074	4.371
P	p>	P<
Significance	NS	Significant
% Recovery	40%	86%

**Table 4: Relief percentage in individuals**

Symptoms	Before Treatment	After Treatment	% Relief
Incomplete closure of eye	143	16	88.81%
Watering of eye	50	7	86%
Deviation of mouth	30	30	0%
Forehead creases loss	30	30	0%
Earache	16	16	0%
Dribbling of saliva	10	10	0%
Heaviness of face	9	9	0%
Tasteloss	0	0	0%

Hyperacusis	0	0	0%
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## DISCUSSION

*Ardita* is one of the *Vata Vyadhi*. Management of *Ardita* is just like *Vata Vyadhi*. It includes *Navan Nasya*, *Murdhni Taila*, *Akshi Tarpana*, *Nadi Sweda*, *Upanaha*, *Kshiratala Pana*, *Abhyanga*, *Dhuma*. In specific condition *Vamana* and *Siraveda* is also indicated. In this study, only *Akshi Tarpana* was selected to see results in *Ardita*. Study reveals results in only eye related symptoms like incomplete closure of eye and watering of eye. Eyelid consists of Orbicularis oculi muscle which forms an oval sheet across the eyelids. It comprises three portions - the orbital, palpebral and lacrimal. It closes the eyelids and is supplied by Zygomatic branch of facial nerve. Therefore in paralysis of facial nerve there occurs lagophthalmos which may be complicated by exposure keratitis.<sup>[16]</sup> Lagophthalmos is condition characterised by inability to voluntarily close the eyelids. It occurs in patients of facial palsy.<sup>[17]</sup> Watering of eye may occur either due to excessive secretion of tears (hyperlacrimation) or epiphora i.e. defective drainage of tears. It is caused by 2 causes i.e. mechanical obstruction in drainage system and lacrimal pump failure. In facial paralysis there is lacrimal pump failure due to weakness of orbicularis muscle. Tears are drained by lacrimal passage into the nasal cavity this is brought about by an active lacrimal pump mechanism constituted by fibres of orbicularis oculi which are inserted on the lacrimal sac. When the eyelid close during blink, contraction of the fibres distends the fundus of the sac, creates there in negative pressure which syphon the tear through punctum and canaliculi into the sac, when the eyelids open the horner muscles relaxes, the lacrimal sac collapses and a positive pressure is created which forces the tear down the nasolacrimal duct into nose, therefore in atony of sac tears are not drained through lacrimal passages, inspite of anatomical patency; resulting in epiphora.<sup>[18]</sup> *Triphala Ghruta* is saturated with decoction of various drugs and hence it contains both lipid and water soluble constituents. Thus it is lipophilic as well as hydrophilic. According to

modern pharmacology, for complete penetration of drug in eye it should be lipophilic and hydrophilic. So it has got very good penetration.<sup>[19]</sup> So action of orbicularis muscle may be increased by *Akshi Tarpana*. *Vyana Vayu* do the closure of eye. One of treatment of *Vata* is *Snehana*. *Akshi Tarpana* is one of the method of *Bahya Snehana*. *Ruksha Guna* of *Vata* is pacified by *Snigdha Guna* of *Ghruta*. Along this *Triphala Ghruta* is good for eyes. All contents of *Triphala Ghruta* are good for eyes, *Snigdha*, *Vatashamaka*, *Balya*, *Bruhana*, *Tarpana* and *Rasayana*. *Netraindriya* is sheet of *Aalochaka Pitta*. *Ghruta* is having *Madhur Rasa*, *Madhur Vipaka* and *Sheeta Virya*, so it is good in *Vatapitta Shamana*. *Utpatti* of *Netrendriya* is of *Majjadhatu*. *Ghruta* gives strength to *Majjadhatu*.<sup>[20]</sup>

## CONCLUSION

In nutshell it can be concluded that *Triphala Ghruta Akshi Tarpana* has effect on only 2 symptoms of *Ardita*. i.e. incomplete closure of eye and watering of eye. Further it can be stated that for complete cure of *Ardita* all other described treatments must be adopted. *Akshi Tarpana* has effect only on eye organ not on whole pathology of *Ardita*. It is only one of the local treatment. Though it is one of the very important treatment. But this study needs further evaluation on large number of patient to finally conclude this statement.

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