

# Ayurvedic Management of Arditavata - A Case Report

## Case Report

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### Abstract

Ayurveda is a branch of ancient science which is not only believe in curing disease but also keeps vision of having healthy lifestyle in terms of *Ahara* (Food), *Vihara* (Healthy regimen) and *Achara* (Good conducts). In present era because of unwholesome food, inappropriate lifestyle, excessive and restless workload etc. and also the environmental factors like excessive cold and flowing of wind becoming reason to cause various disorders. *Acharya Charaka* explained 80 *Vataja Nanatmaja Vyadhi*, *Arditavata* is one of those disorders. Due to similar clinical symptoms of *Arditavata*, in contemporary science can be correlated with Bell's palsy-caused by dysfunction of facial nerve-which is VII cranial nerve which affects the movement of facial muscles. Facial nerve dysfunction can seriously influence a patient's perspective for life. The human face is a part of communication and appearance. Facial palsy results in both functional and cosmetic impairments. In this disease with Ayurvedic treatment approach there is 90% cure rate, which is very beneficial for the present era patients who are having such type of diseases. This case study is here to show the result and curative approach of classical medicines in *Arditavata*.

**Key Words:** *Arditavata*, Bell's Palsy, *Mukhabhyanga*, *Ksheerabala taila*, *Ksheeradhooma*, *Nasyakarma*.

### Introduction

Ayurveda is now a day's ray of hope for the present generations, who are suffering from lots of stress, anxiety, and work load. These all conditions altering the functions of *moola* of human body that are *dosha*, *dhatu* and *mala*. (1) Mainly *Vata Dosha* is the one which acts on nervous system or we can say *Vata* is nothing but nerve conduction base. Our nervous system controls all motor and sensory system of our body. *Vata*-which is root of our nervous system and also control the movements of other *dosha* of human body (2) if work in the equilibrium form leads in normal control of nerve conduction and systemic function in body associated with other *doshas*, *rasa*, *rakta dhatus* and *mala* etc. But if *Vata doshas* aggravates due to certain reasons leads to alteration of nerves conduction function, which cause various neurological disorders like monoplegia, hemiplegia, Bell's palsy etc. *Arditavata* is one among these. *Acharya Charaka* has explained it as a *Vataja nanatmaja vyadhi* (3) and *Acharya Sushruta* explained it in the *Vatavyadhi adhyaya* of *chikitsa sthana*. (4) All *Acharyas* have considered the face is the primary part in *Arditavata* which is getting afflicted by *Vata dosha*. *Acharya Charaka* (5) and *Acharya Vagbhata* (6) also mentioned

this disease is localized in half of the face with or without the involvement of the body. *Arditavata* resembles Facial Paralysis or Bell's Phenomenon according to their signs and symptoms, this involves the paralysis of any structures supplied by the facial nerve (7<sup>th</sup> Cranial nerve). Facial nerve paralysis is characterised by unilateral facial weakness, with other symptoms including (7)-Loss of taste, Decreased salivation, Lacrimation, Mouth deviation etc.

### Nidana (Causative Factors)

Nidana (Causative Factors) according to different *Acharyas* which one should take care to avoid such diseases because Prevention is better than cure are:

*Acharya Charaka* (8) mentioned suppression of the urge of sneeze, *Shiroroga*, Carrying heavy loads on head, sudden movement of head and neck, sleeping in an uncomfortable posture, Use of pillows in wrong posture; either too high or too low etc. *Acharya Sushruta* (9) and *Vagbhata* (10) said speaking loudly in excess, Churning hard food stuffs, Excessive laughter, yawning and sneezing. *Acharya Sushruta* added *Rakta Kshaya*, (depletion of blood) in specific group of patients get afflicted by *Arditavata*. Pregnant women, recently delivered lady, Children, Old people, Emaciated persons. *Acharya Vagbhata* (11) explained *Arditavata* is a disease, causes due to the vitiation of *Pranavata*. *Yogaratanakara* explained Excessive tongue scrapping, *Siravyadhana* (if done improperly), Injury to the Marmas (Vital points in the head) Excessive rubbing of the eyes, ears and nose, by consuming alcohol and *Asavas* in excess etc.

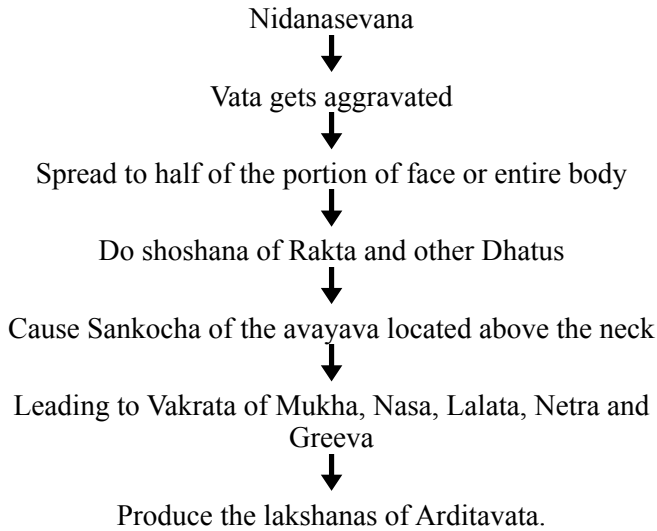
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### Samprapti (Pathogenesis)



### Purvaroop (Premonitory Symptoms) and Roopa (Symptoms)

The Poorvarupa and Roopa) of Arditavata described by Acharya Sushruta is as follows: *Romaharsha* (Horripilation), *Vepanam* (Tremors), *Avila Netrata* (Blurred Vision), *Toda* (Pain), *Twachi Swapa* (Loss of Sensation of Skin), *Vaktrardhavakra* (complete or partial loss of voluntary functions of one side of the face), *Vaikruta Netradi* (Deformities in Eye), *Greevachapya* (Cervical pain), *Vaksanga* (Inability to speak), *Manya Sthamba* (Stiffness Of The Neck), *Hanugraha* (Stiffness of the Jaw). (12,13)

### Sadhyasadyata (Prognosis)

If Arditavata is present in patients who are ksheena (debilitated), animesh-aksha (unable to close the eyes), avyakta bhashina (with slurred speech), vepana (tremors), Trivarsha (3years chronicity) (14) or discharge from mouth, eyes and nose is difficult to cure. Spectrum of Vata vyadhis which includes Arditavata can be cured effectively if the patient is Balavana and if the disease is developed recently.

### Case report

A 25 years old female patient with 58 kg of body weight came to *Kayachikitsa* OPD (OPD NO. 24137) of D.G.M. Ayurvedic Medical College, Gadag with complaint of Mouth deviation towards Right side, Unable to close eye on Left side, Earache, Headache from last 8 Days.

### History of present illness

Patient was apparently normal before 8 Days. A 25 years old female was apparently normal 8 days back. Suddenly she noticed deviation towards right side of face, heaviness in left side of face, difficulty in closing left eye, difficulty in moving up left eyebrow. Patient was non-Diabetic, non-Hypertension. Patient was treated elsewhere from other hospital but did not find any relief. She came to our OPD for Ayurvedic management.

### Chikitsa Vrittanta

For this problem patient took allopathic treatment and found no relief.

### Poorvavyadhi Vrittanta

No History of any other major illness.

### Kula Vrittanta:

All family members are said to be healthy

### Clinical examination

#### Ashtavidha Pariksha

*Nadi* (Pulse): 80/min, *Mala pravrutti* (Stool): Asamyak Pravartana, *Mutra pravrutti* (Urine): Prakrutta, *Jeeva* (Tounge): Aliptata, *Kshudha* (Agni): Mandya, *Shabda* (Speech): Prakrutta, *Sparsha* (Skin): Shitoshna, *Khara*, *Dhruka* (Eyes): Prakrutta, *Nidra* (Sleep): Khandita, *Akrutti* (Stature): Madhyama, *Bala* (Strength): Uttama.

### Systemic examination

#### Neurological examination

- ◆ Motor system examination was done based on Bell's phenomenon - positive on Left side of face.
  - Unable to whistle
  - Deviation during mouth clenching
  - Loss of furrow over the forehead
  - Unable to do full mouth inflation
  - Unable to close the left eye fully

### Treatment schedule

#### Materials and Methods

#### 1<sup>st</sup> schedule (Treatment was Started on the same day patient arrived)

- Mukhabhyanga- with Ksheerabalataila for 8 days
- Ksheeradhooma for 8 days
- Nasyakarma with Ksheerabala101 taila for 8 days
- Dhoomapana with Haridra dhooma.
- Tab Cognium 500 mg 1Tab three times after food for 8 days
- Dhandhnadya kshayam 4tsf three times before food with equal water
- Ekangaveera Rasa 125mg 1tab. three times after food for 8 days.

#### 2<sup>nd</sup> schedule (After completion of Nasya Karma)

- Tab Cognium 500 mg 1Tab three times after food for 8 days
- Dhanadhnadya Kshayam 4tsf three times before food with equal water
- Ekangaveera Rasa 125mg 1tab. three times after food for 8 days

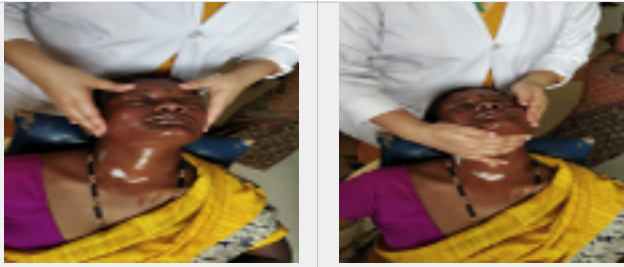
#### Exercise

- Balloon blowing exercise three times a day.
- Eyebrows rising exercise in front of mirror three times a day for 5 minutes.

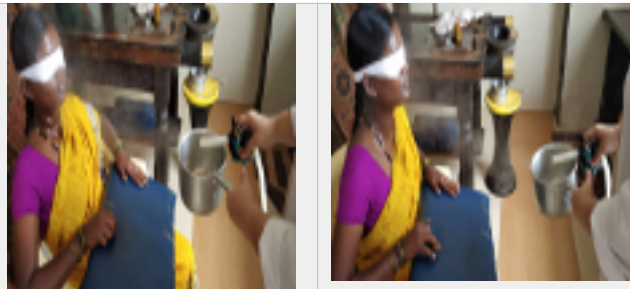
**Total course of treatment is 23 days with follow up after 7 days.**

**Images of Procedure done**

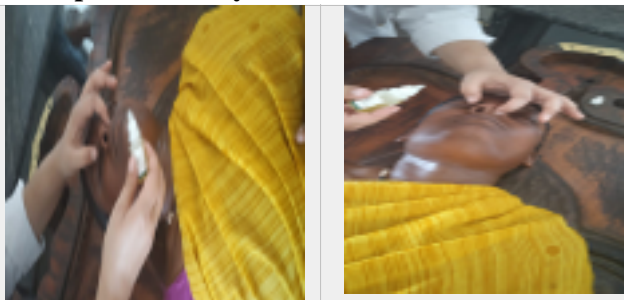
**Step 1<sup>st</sup> → Abhyanga with Ksheerabala taila**



**Step 2<sup>nd</sup> → Balamoola siddha kashaya ksheeradhooma**



**Step 3<sup>rd</sup> → Nasya with Ksheerabala taila 101**



**Step 4<sup>th</sup> → Dhoomapana**



**Description of Procedure**

The patient is thoroughly examined for her Prakruti-Vikruti.

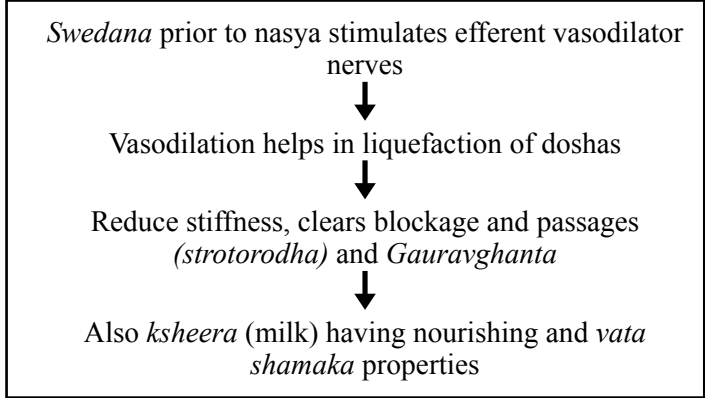
**1<sup>st</sup> step (Mukha abhyanga with Ksheerabala taila):** Took lukewarm oil in the container and asked the patient to sit on chair with head tilted backward direction by giving support with pillow to neck. Then do *Abhyanga* (massage) to whole face within specific directions that is from neck upward, from affected side to normal side of face, and zigzag direction on forehead and chin.

Probable Mode of action: (15)

Sneha having Vatashamanan and Mrudukarna effect  
 ↓  
*Sneha do Mardavata*, it brings softness in *dosha sanghata, strotas*  
 ↓  
 Overcome *Rukshata* by its *Snigdha* and *Vishyanda* properties which is cause of *mala sanghata*

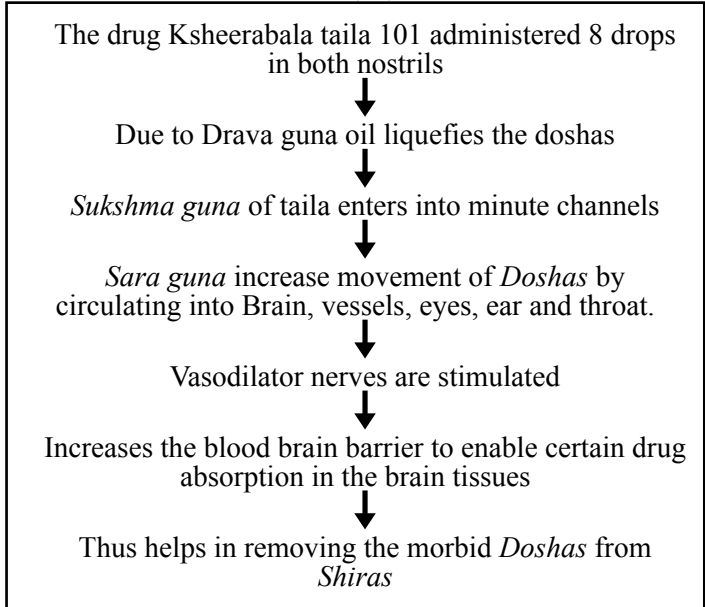
**2<sup>nd</sup> step (Ksheeradhuma with Balamoola Kashaya):** After abhyanga put cotton on eyes of patient and tie with bandage before doing *swedana* (steam). Do *ksheeradhuma* (dhuma- vapours or steaming) in form of *mridu nadi swedana* to face and neck that is type of *ekanga sweda*.

Probable Mode of action: (16)



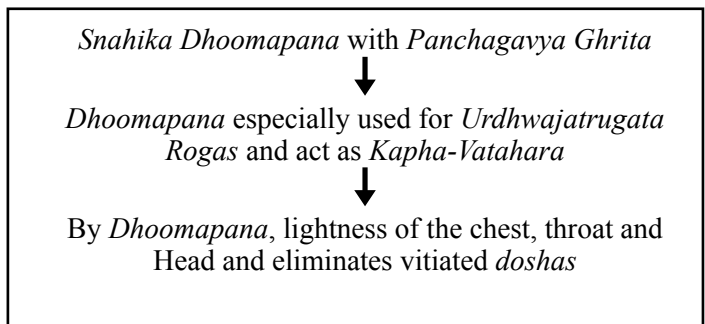
**3<sup>rd</sup> step (Nasya with Ksheerabala taila 101):** Lie down the patient on *dhroni* (massage bed) and tilt head to upward direction and ask the patient to relax. Then put *Nasya* 8-8 drops in each nostril alternately and comfort the patient by rubbing nose and asked the patient to spit after 5 minutes.

Probable Mode of action: (17)



**4<sup>th</sup> step (Dhoomapana):** Patient was asked to sit up and was given *Haridra dhooma* and asked the patient to inhale dhoom from each nostril alternately and blow out from mouth upto 5 minutes.

Probable Mode of action:





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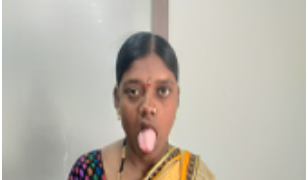

**Precautions advised during procedure**

- Keep cotton wool (swab) in both ears
- Do not expose to cold environment
- Do not take head bath during *Nasyakarma*
- Do not eat cold food and drink cold water
- Do not eat hard food and also avoid mental stress for better and fast result.

**Paschat karma**

After procedure patient followed by Shaman *Aushadis* said earlier for 8 days.

**Images of before, after and during the procedure**

Before Treatment	AFTER TREATMENT
Not able to close left eye <b>IMAGE-1</b> 	Able to close her left eye <b>IMAGE -2</b> 
Loss of furrows on forehead <b>IMAGE-3</b> 	Improvement of furrows <b>IMAGE-4</b> 
Appearance during closure of mouth <b>IMAGE-5</b> 	Appearance during closure of mouth <b>IMAGE-6</b> 
Twitching of mouth to right side of face <b>IMAGE-7</b> 	Twitching of mouth reduced <b>IMAGE-8</b> 
Deviation of tongue to right side <b>IMAGE-9</b> 	Less deviation of tongue <b>IMAGE-10</b> 

Not able to blow air through the mouth <b>IMAGE-11</b> 	Able to blow air through mouth <b>IMAGE-12</b> 
Before treatment appearance of the patient <b>IMAGE-13</b> 	After treatment appearance of the patient <b>IMAGE-14</b> 

**Assessment of results**

On the basis of “House Brackmann’s Gradation System” assessment was done.

**Table 1: Grading for assessment of clinical feature**

Clinical feature	Grading	Before treatment	After treatment
<b>Face: Relief twitching of Right side face (deviation)</b>			
Not persistent	0		0
Persistent but do not disturb routine work	1		
Persistent disturb routine work	2	2	
Constant	3		
<b>Eyebrows: difficulty in moving up left eyebrow</b>			
Not persistent	0		0
Persistent but do not disturb routine work	1	1	
Persistent disturb routine work	2		
Constant	3		
<b>Mouth: drifting of mouth in left side angle</b>			
Not persistent	0		0
Persistent but do not disturb routine work	1		
Persistent disturb routine work	2	2	
Constant	3		
<b>Eye: difficulty of closing left eye</b>			
Not persistent	0		0
Persistent but do not disturb routine work	1		

Persistent disturb routine work	2	2	
Constant	3		
<b>Tongue: deviated to right side</b>			
Not persistent	0		0
Persistent but do not disturb routine work	1	1	
Persistent disturb routine work	2		
Constant	3		

## Discussion

*Arditavata* symptoms as mentioned in classics are similar to the Bell's Phenomenon in contemporary medicine. It is facial nerve palsy. There are many clinical approaches to cure such disorders by just following Ayurvedic treatment protocol. It is time to except the fact that Ayurveda itself having best curative approaches for such types of disease and thus it should be used worldwide to cure and to serve good treatment protocol to benefit patients.

## Conclusion

The *nidan*s explained in classics are noticed in this patient like Patient mainly has history of *Chinta*, *Bhaya* and *Ratrijagarana*. The lakshanas explained in classics are noticed in this case. The Chikitsa sidhanta followed here is *Dhatuwardaka* and *Vatashamaka Chikitsa* as the disease belongs under *Vatavyadhi*. After following *Ksheeradhooma*, *Nasya karma*, patient found GOOD relief in her symptoms. There is direct indication of *Nasyakarma* in *Arditavata* by acharyas. (18)The treatment advocated in Ayurveda for *Arditavata* (facial palsy) was instituted to this patient, who was cured without any further complications and side-effects.

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