**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 (7th 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 Susrutra (9) and Vagbhata (10) said speaking loudly in excess, Churning hard food stuffs, Excessive laughter, yawning and sneezing. Acharya Susrutra 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. Yogaratnakara explained Excessive tongue scraping, Sirrayadhana (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)

- Nidanasevana
- Vata gets aggravated
- Spread to half of the portion of face or entire body
- Do shoshana of Raktta and other Dhatus

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


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

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.

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.
Description of Procedure
The patient is thoroughly examined for her Prakrutti-Vikrutti.

1st 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 Rukhsata by its Snigdha and Vishyanda properties which is cause of mala sanghata

2nd 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)

Swedana prior to nasya stimulates efferent vasodilator nerves
Vasodilation helps in liquefaction of doshas
Reduce stiffness, clears blockage and passages (strotorodha) and Gauravghanta
Also ksheera (milk) having nourishing and vata shamaka properties

3rd 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)

The drug Ksheerabala taila 101 administered 8 drops in both nostrils
Due to Drava guna oil liquefies the doshas
Sukshma guna of taila enters into minute channels
Sara guna increase movement of Doshas by circulating into Brain, vessels, eyes, ear and throat.
Vasodilator nerves are stimulated
Increases the blood brain barrier to enable certain drug absorption in the brain tissues
Thus helps in removing the morbid Doshas from Shiras

4th 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:
Snahika Dhoomapana with Panchagavya Ghrita
Dhoomapana especially used for Urdhwajatrugata Rogas and act as Kapha-Vatahara
By Dhoomapana, lightness of the chest, throat and Head and eliminates vitiated doshas
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

<table>
<thead>
<tr>
<th>Before Treatment</th>
<th>AFTER TREATMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not able to close left eye</td>
<td>Able to close her left eye</td>
</tr>
<tr>
<td>IMAGE-1</td>
<td>IMAGE -2</td>
</tr>
</tbody>
</table>

Loss of furrows on forehead
IMAGE-3

Improvement of furrows
IMAGE-4

Appearance during closure of mouth
IMAGE-5

Appearance during closure of mouth
IMAGE-6

Twitching of mouth to right side of face
IMAGE-7

Twitching of mouth reduced
IMAGE-8

Deviations of tongue to right side
IMAGE-9

Less deviation of tongue
IMAGE-10

Assessment of results
On the basis of ‘House Brackmann’s Gradation System’ assessment was done.

Table 1: Grading for assessment of clinical feature

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

References
1. Ambika Dutt Shastry edited Sushruta Samhita of Acharya Sushruta; Reprint; Varanasi-Chaukambha Sanskrit Sansthan, 2014; Sutrasthana, Chapter -15, Shlok- 03;73p.

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 nidanas explained in classics are noticed in this patient like Patient mainly has history of Chinta, Bhaya and Ratrirajaragana. The lakshanas explained in classics are noticed in this case. The Chikitsa sidhanta followed here is Dhatuvardaka and Vatahashamaka 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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