A CLINICAL STUDY TO EVALUATE THE EFFICACY OF PANASA PATRA SWEDA AS POORVA KARMA FOR NASYA IN ARDITA W.S.R TO FACIAL PALSY

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ABSTRACT

Arditha is explained as one among the Vatatanathmaja vyadhi by Acharya Charaka. Acharya sushrutha has considered as only Mukha ardha while Acharya Charaka has included Sharira ardha in Arditha. Facial nerve paralysis is the condition which presents with the deviation of half of the face and associated with the impairment of motor and sensory functions of the affected side of the face. Facial paralysis can be placed under the wide spectrum of Arditha vyadhi. In recent years, life time prevalence is about 6.4 to 20 per 1000, which increases with age, and predominantly seen in females. Contemporary science adopts the treatment wherein chances of reoccurrence are possible. Both Acharya Charaka and Sushrutha, mentioned Nasya and Swedana as the prime line of treatment modalities in Ardita. Aims and objectives of the present study is to evaluate the efficacy of Panasa patra sweda followed by Nasya karma in Ardita. 10 patients fulfilling the inclusion and exclusion criteria were selected for Panasa patra sweda as Poorva karma and Nasya for 7 days with Ksheera bala taila 101. It was observed that maximum patient in the study given statistically significant relief in almost all parameters. The results of the present clinical study has given (p<0.001) which shown statistically highly significant.

KEYWORDS: Nasya karma, Arditha, Facial paralysis, Panasa patra sweda.

INTRODUCTION

Facial nerve paralysis is a common problem that involves the paralysis of any structures innervated by the facial nerve. It is an acute, apparently isolated, lower motor neuron palsy for which no cause can be found. Symptoms includes loss of taste, hyperacusis, incomplete eye lid closure, watering of eyes, sweating less on affected side[1]. Facial paralysis is due to the lesion of the pyramidal tract between the cortex and the middle of pons (UMN paralysis) and nucleus and the seventh cranial nerve (LMN paralysis). Causes include 1) upper motor neuron lesions - cerebro-vascular accidents, Trauma, Cerebral tumors 2) lower motor neuron lesions-Otitis media, herpes zoster, head injury, GB syndrome. The present line of treatment in the contemporary field of science involves the administration of cortico steroids, Anti viral medications, surgical and local treatment of muscles [2], yet reoccurrence and synkinesis is reported, hence an effective, safe, treatment is required for the better management of facial paralysis. Signs and symptoms of facial paralysis relate to that of Arditha, which is caused by aggravation of Vata, it has been enlisted among Vata nanatmaja vyadhi.[3] Acharya Charaka has included Sharira artha in Arditha.[4] While Sushrutha has considered as only face is affected in Arditha.[5] In Ayurvedic classics treatment available for Arditha is Upanaha, Nadi sweda, Navana Nasya[6] Keeping this in view a study conducted on 10 cases of Arditha (facial paralysis) from OPD and IPD of SKAMCH&RC, Bengaluru and treated with Panasa patra sweda followed by Nasya karma.

Incidence

Annual incidence of this idiopathic disorder is 25 per 100,000 annually, or about 1 in 60 persons in a life time.[7]

Objectives

- To evaluate the efficacy of Panasa patra sweda followed by Nasya karma in Arditha.

MATERIALS AND METHODS

The patients were selected from the OPD and IPD of SKAMCH&RC after considering the Inclusion and Exclusion criteria. Then they were selected on the basis of clinical examination, signs and symptoms in a single group and treatment was adopted. Totally 10 patients were registered for the study and Assessment of results was done by considering the subjective and objective parameters pre and post treatment. Then it was compared for assessments and results. All the results were analysed statistically for ‘P’ Value using paired t-test.
Inclusion Criteria
- Patient presenting with signs and symptoms of Ardita is selected.
- Patient between the age group of 20-60 years, irrespective of religion, sex, socioeconomic status, occupation are included for the study.

Exclusion Criteria
- Patient of age <20 years and > 60 years.
- Patient suffering from intracranial tumour, intracranial haemorrhage, involvement of ipsilateral or contra lateral hand and leg.

Diagnostic criteria
- Signs and symptoms of Arditha
- Signs and symptoms of facial paralysis.

Study Design
- A clinical study of Panasa patra sweda as Poorvakarma for Nasya in the management of Ardita where in Pre-test and Post-test design was done.
- 10 patients of Ardita (facial paralysis) who fulfilled the inclusion criteria were selected.

ASSESSMENT PARAMETERS

Subjective parameters
1. Mukhardha vakratha
2. Vaksanga
3. Ekakshi nimeelana
4. Netravikriti

Intervention
- Purva karma- Sthanika abhyanga with Moorchitha tila taila followed by Panasa patra sweda.
- Pradhana karma- Nasya karma with Ksheera bala 101 in the dosage of 8 drops in each nostril for a period of 7 consecutive days.
- Paschat karma- Kavalagraha with Sukoshna jala and Dhoomapana with Haridra was given.

Time of Administration- Prakbhakta (morning) before Breakfast.

Procedure
Poorva karma
Mukha abhyanga with Moorchitha tila taila followed by Panasa patra sweda.

Procedure for Panasa Patra sweda
Panasa patra sweda comes under Snigdha ushma sweda.

Materials required for one day
Panasa patra – 10-12
Moorchitha tila taila - 50ml.

After Sthanika abhyanaga with Moorchitha tila taila, 4-5 leaves of Panasa is taken and heated in a pan which is smeared with Moorchitha tila taila, when the leaves becomes relatively hot it has to be tapped to the face. This has to be repeated for minimum of 20 mins.

Procedure for Nasya: Patient was asked to lie in supine position, proper Mukha Abhyanga was done with Murchita Taila to face followed by Panasa patra sweda. After that patient is asked for Nasya position (Kinchita pralambita shirasa) and Ksheerabala taila 101[8] which was indirectly heated in warm water made luke warm and instilled with Shukti 8 drops to each nostrils. Asked to remain in same position for 10 mins, and instructed not to swallow the Taila and spit out if comes to throat region. Patients are asked to follow the regimens needful after Nasya such as keeping warm, not to take head bath, staying warmth, not having cold items.

Paschat Karma- Kavalagraha with Sukoshna jala and Dhoomapana with Haridra will be done.

OBSERVATION AND RESULTS
In this study 10 patients fulfilling the inclusion criteria were registered. All the patients were examined before and after the treatment. Changes were recorded.

Table 1: Showing effect of the treatment on Mukha vakratha

<table>
<thead>
<tr>
<th>Mukha vakratha</th>
<th>Mean Before</th>
<th>Mean After</th>
<th>Mean diff.</th>
<th>Paired test</th>
<th>S.D</th>
<th>S.E</th>
<th>‘t’</th>
<th>p</th>
<th>Re</th>
</tr>
</thead>
<tbody>
<tr>
<td>BT-AT</td>
<td>2.8</td>
<td>1</td>
<td>1.8</td>
<td></td>
<td>0.48</td>
<td>0.15</td>
<td>10.66</td>
<td>&lt;0.005</td>
<td>HS</td>
</tr>
</tbody>
</table>

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Out of 10 patients exhibiting the features of
type, 2 patients completely recovered and 8
patients showed mild type. This showed highly significant, due to the Swedana effect it acts upon
Sthamba, and it showed highly significant result.

<table>
<thead>
<tr>
<th>Table 2: Showing Effect of the treatment on Vak sanga</th>
</tr>
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<tbody>
<tr>
<td>Mean</td>
</tr>
<tr>
<td>Before</td>
</tr>
<tr>
<td>BT-AT</td>
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</tbody>
</table>

Graph 2:

Out of 10 patients 6 patients completely recovered from Vaksanga, remaining 4 patients showed
significant result. In Nasya therapy medicated oil is administered in nostrils, these medicines reaches to
Shringataka marma and spreads into all Srotas (vessels, nerves) and eliminates the vitiated Dosha. Nasya
nourishes nervous system by vascular pathway.

<table>
<thead>
<tr>
<th>Table 3: Showing Effect of the treatment on Netra vikriti</th>
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<tbody>
<tr>
<td>Mean</td>
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<tr>
<td>Before</td>
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<td>BT-AT</td>
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</tbody>
</table>

Graph: 3

Out of 10 patients 4 patients completely recovered from Netra vikriti, remaining 6 patients showed
highly significant result. Nasya karma which is treated for Urddhajatragata vikara, does the Samprapti
vighatana of Dosha and Doshya thereby relieving Netra vikriti.

<table>
<thead>
<tr>
<th>Table 4: Showing Effect of the treatment on Ekakshi nameelana</th>
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<tbody>
<tr>
<td>Mean</td>
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<tr>
<td>Before</td>
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<td>BT-AT</td>
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</table>
Efficacy of Panasa Patra Sweda as Poorva Karma for Nasya in Ardita w.r to Facial Palsy

DISCUSSION

Arditha is one among the Vata nanatmaja vyadhi explained by Charaka acharya and the treatment should be employed by using Brimahana and Balya drugs which alleviates Vata. Acharya Charaka emphasized Swedana and Nasya in Chikitsa sutra of Arditha. Facial Palsy involves disturbances in almost all the sense organs, the Nasya karma with Ksheerabala thaila 101 suppresses nerve inflammation and promotes nerve regeneration and gives strength to muscles due to Balya and Brimhana properties of drugs present in it. The Nasya dravya medicine acts at Sringataka marma from where it spreads into various Srotas and brings out all vitiated Doshas from Urdhvjataguta vikara. So Shodhana in the form of Nasyakarma i.e., Navana nasya is adopted in this study which has shown highly significant result.

CONCLUSION

Arditha involves the Dhaut kshayaja samprapthi in its manifestation. Acharyas have indicated Snehana, Swedana and Navana nasya in its management. Hence in this study Sthanika abhyanaga with Moorchhila tila taila, Sthanika panasa patra sweda, Navana nasya with Ksheera Bala 101 was employed in the study shown highly significant results in all parameters. The treatment employed here acts as Vata shamanaka, alleviation of Sthabdattha due to Ushna guna of Swedana. Navana nasya which alleviates the Vata dosha due to Madhura and Brihmana effect and their by disintegrates the Samprapthi involved in Arditha.

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