



(CASE REPORT)



## Ayurvedic management of *Arddita* with special reference to Bell's palsy: A case study

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### Abstract

*Arddita* (Bell's palsy) is considered as one among the eighty *Vata Nanatmaja Vyadh is* in Ayurveda. It can be correlated with the disease 'Bell's palsy. Bell's palsy is a condition that developed; facial palsy the paralysis of facial nerve also affects the movement of facial muscles and shows similar symptoms. A 17 years old male patient approached to OPD who was suffering from complaints of deviated face on left side, unable to chew from right side, improper blinking of right eyes and slurred speech since 20 days. He was clinically diagnosed as Bell's palsy and managed through Panchkarama & palliative treatment for 27 days. The patient got complete relief in all symptoms with appreciable changes. Bell's palsy can be managed by giving comprehensive management of Panchkarma and palliative treatment which reflects that it is good remedy for Bell's palsy. Bell's palsy is characterised by the sudden weakness in the muscles of one half of the face due to the inflammation or compression of facial nerve which is commonly unilateral. Bell's palsy can be correlated to *Arddita* mentioned in *Ayurvedic* classics. *Arddita* is included among *Vatavyadhi*. The aggravated *Vata* will produce symptoms like deviation of half of the face, Tremulousness in the head, Speech difficulty, deformities in eyes etc. A 17 year old male patient reported in the outpatient department with sudden onset of deviation of angle of mouth towards right before 2 weeks. The complaints are associated with speech difficulty, drooling of saliva from the left side, inability to close the left eye, reduced taste sensation, heaviness & mild swelling over the affected side of the face.

The case was clinically diagnosed as Bell's Palsy/*Arddita*. The patient is treated with *Kaphahara/Sophahara* followed by *Vatahara* medicines and procedures. The case was assessed with 'House and Breckmann' assessment scale. The result showed significant improvement in motor factions and asymmetry of face. After the treatment, the 'House and Breckmann' gradation improved from grade 4 to grade 1. This case report shows that classical *Arddita* treatment is effective in Bell's palsy.

**Keywords:** *Arddit*; Bell's palsy; Panchkarama; *Vata vyadhi*; Palliative treatment

### 1. Introduction

Bell's palsy is a condition that causes sudden weakness in the muscles on one side of the face. In most cases, the weakness is temporary and significantly improves over weeks. The weakness makes half of the face appear to droop. Smiles are one-sided, and the eye on the affected side resists closing.

Bell's palsy is also known as acute peripheral facial palsy of unknown cause. It can occur at any age. The exact cause is unknown. Experts think it's caused by swelling and inflammation of the nerve that controls the muscles on one side of the face. It could be caused by a reaction that occurs after a viral infection.

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Symptoms usually start to improve within a few weeks, with complete recovery in about six months. A small number of people continue to have some Bell's palsy symptoms for life. Rarely, Bell's palsy occurs more than once.

## 2. Case Study

A 17 year old, moderately built male, belonging to middle class household student, visited to Kayachikitsa OPD with the complaints of deviation of mouth towards right side (*Vakree karo ti nasa bhru lalata akshi hanu statha*), watering (*Netramaavilam*), unable to blink (*Stabdha netram, Ek asyaakshonemeelanam*), difficulty in chewing food on the left jaw (*Bhrojana miti nasa mammukhenakhadati*) and pricking pain in left eye since ten days.<sup>[7], [8], [9]</sup> His physician diagnosed the condition as Bell's palsy. He had a history of excessive exposure to wind before the manifestation. Started with watering of eyes with mild swelling in the lower lid of the left eye. He consulted eye specialist for the same and prescribed eye-drops. No remission in symptoms was seen. Next day, he had sudden onset of deviation of mouth and weakness on the right side (*Samutkshiptetiatiwaritah*).<sup>[10]</sup> Followed by inactivity of eyelid movement of left eye and difficulty in speech (*Vaak sanga*).<sup>[11]</sup> As per patient's report treatment was started with steroids for five days and advised to continue for another five days. As satisfactory results were not observed, patient stopped the use of steroids against medical advice before seven days of consultation for Ayurvedic treatment.

### 2.1. Physical Examination

Higher mental functions were intact with motor functions of facial nerve affected. Deviation of mouth towards right side observed on clenching of the teeth. Mouth deviated on right side and leakage of air through the left angle of mouth observed on an act of filling of air in mouth. Complete closure of left eye was not possible and unable to raise the left eye brow with absent wrinkles on left side of the forehead, indicating the affected motor function of the facial nerve, however the sensory functions were unaffected.

### 2.2. Treatment

**Table 1** Treatment given

Sr. No.	Formulation	Day of treatment Administration	Total Duration of treatment
1.	<i>Mukha Abhangya With Ksheerabala Taila</i> Followed by <i>Nadi Sweda</i>	Day 1 to Day 7	7 Days
2.	<i>Nasya with Karpasasthyadi taila</i> 8 drops in each nostril	Day 1 to Day 7	7 Days
3.	Physiotherapy-Proprioceptive neuro muscular facilitation	Day 1 to Day 7	7 Days
4.	-Tab. Ekangaveer Rasa trice a day -Cap. Ksheerabala twice a day -Dhanadhanadi Kashaya 10 ml thrice a day	Day 1 to Day 7 And for 20 days after Nasya treatment	27 Days

### 2.3. Pathogenesis

Due to the excessive exposure to cold wind, vitiated *Vata* with *Kapha* are involved in the genesis of the disease. *Prakupitavata* (aggravated *vata*) along with *Kapha* settles in *Sandhi* (joints of above clavicle) of *Shira* (head), *Nasa* (nose), *Hanu* (mandible), *Lalata* (forehead), and *Netra* (eye). *Snayu* (ligaments) and *Kandara* (muscles) are affected by the aggravated *Doshas* and presented symptoms on the left half of the face with all the features of *Arditavata*. This condition is akin to Bell's palsy in contemporary science, where the facial nerve palsy presenting with above symptoms is seen.

Bell's palsy can be correlated to *Arditavata* in Ayurveda. Even though this condition is gradually resolves over time<sup>[16]</sup> needs proper and timely administration of intervention to prevent irreversible changes. Hence, in conventional therapy, steroid administration as early as possible is considered as the line of treatment. In the current case; treating Bell's palsy without continuing steroid treatment yielded complete recovery within seven days of treatment.

While discussing the causative factors for *Vatavyadhi* (*Vatadosha* predominant disorders - in present context),

excessive exposure to cold wind is considered as one of the causative factors in the vitiation of Vata that was evidenced in the present case.

#### 2.4. Treatment principle and rationale of treatment adopted

As there is association of Vata with Kapha, the Vata Kaphahara Chikitsa is to be adopted. Navana Nasya (putting medicated oil drops in the nostrils), Moordhni Taila (different modalities of treatment of putting medicated oil over the head), Tarpanachikitsa (putting medicated oil over the eyes), Nadisweda (fomentations to face through the tubular structures), Upanaha (application of paste prepared of medicines to head) and Anooopa mamsasevana (consumption of meat of animals residing in Marshy area) is the line of treatment mentioned for Ardita.<sup>[17]</sup> Based on this, the Karpasasthyadi navana nasya and Sthanika nadisweda have been adopted to remove Urdhwajatrugata Doshas. To subside the remaining Doshas, oral medications combating Vata and Kaphadosha have been selected. Ashwagandha (*Withaniasomnifera* (L.) Dunal) is observed to have beneficial effects on nervous system as neuritic regeneration and synaptic reconstruction and many more, used as internal medication.<sup>[18]</sup> Sameerapannaga rasa is considered to be quick control over the Vata and Kaphashamana in Vegavastha of Vyadhi.<sup>[19]</sup> Shilajatu is Vatakaphahara, Rasayana and possesses neuroprotective activity.<sup>[20]</sup> Possibly, a combination of all these formulations helped in breaking the pathology at different levels.

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### 3. Conclusion

Navana Nasya with Karpasasthyadi Taila followed by the oral medicines in the treatment of Bell's palsy (*Arditavata*) has provided significant improvement in this case. No conventional drugs were used during the course of treatment.

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### Compliance with ethical standards

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#### Statement of informed consent

Informed consent was taken from the patient

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