



ROLE OF NASYA IN ARDITA

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ABSTRACT

Ardita is the most common form of peripheral palsy of the facial nerve. Prognosis for recovery is good for most patients, in few cases, different grades of residual impairment persist. Panchakarma, in association with drug administration, aims to improve outcomes and prevent residual impairment. Panchakarma appears to be effective in the severe and less severe cases of bell's palsy resulting in complete recovery without any evidence of residual palsy. Panchakarma techniques like nasya have a definite role in relieving the patient of any social stigma due to residual impairments.

KEYWORDS: Ardita, Vatavyadi, Snehana, Nasya, Panchakarma, Residual impairment.

INTRODUCTION

Ardita is considered as a vatauyadi according to Bruhatraji. It is caused by aggravation of vata. It has been enlisted among eighty types of nanatmaja vyadhis.

Ardita called as Ekayaam by Ashtang Hrudya. Archya Charak has included Sharirardha in Ardita while Sushruta has considered as the face is only affected in ardita. In the modern text it is correlate with facial palsy on the basis of signs and symptoms mentioned there in it. It is caused due to lesion on the seventh cranial nerve i.e facial nerve which leads to partial or total loss of movement of unilateral face.

Charaka attributed the root cause of Ardita to highly vitiated vata doshas whereas Ayurvedic experts like Shodhal classified Ardita on doshic influence of Kapha and pitta rather than vata. Ardita in Ayurveda is due to transferring heavy wt. on head, excessive laughing, loudly talking, sudden fearing, sleeping on uneven bed, eating hard food particles, other vatavardhaka ahara-vihara. Due to Vata prakopa, it vitiates, it enters in all the empty channels (Srotas) of the body and then creates different types of Ekangagata and Sarvangagata Vyadies (80 types of vata disorder described by classics including various disease like Ardita, pakshaghat, joint disorder). The main symptoms of Ardita are Vakraardha, netravigrit, lalasarava, vakasang, parsh vedana etc. Sushruta. In Ayurveda Panchkarma along with drug administration aims to improve its outcome and prevent the residual treatment Panchkarma like Nasya has a definite role in

relieving the impairment. Nasya is a process by which medicated oil is administrated through the nostril.

Incidence

According to statistical data, facial paralysis affects around 1 in 1000 of the general population.

Ratio

Most commonly occur between ages of 15 and 60 years.

Both men and women are affected equally.

It is more common in pregnant women and those with diabetes.

Causes

- | | |
|------------|---|
| - Diabetes | - Exposure to cold |
| - HTN | - Herpes virus |
| - Trauma | - Intracranial bleeding |
| - Toxins | - Compression of nerve due to rolapse of disc |

Symptoms

- Loss of feeling in the face
- Headache
- Tearing
- Drooling
- Loss of control fascial expression such as Smiling blinking closing the eye.
- Loss of sense of taste
- Inability to close the eye on the affected side of the face.

Procedure of Nasyakarma

Nasya karma is a method of panchkarma in which medicated oils are instilled into the nose, this has an excellent role in improving the function of the facial muscle in cases of bell's palsy. Prior to nasya, purvakarma measures are done like snehan, swedan, to the face, forehead, head, ears, neck. After poorvkarma, pradhan karma procedure is done. Patient is made to lie down in supine position, with head at a lower position by keeping a pillow below the neck. The oil is first kept over hot water to warm it and then is made to slowly flow into one nostril keeping the other nostril closed. The procedure is then repeated for other nostril. The role, shoulder, neck, ear and palm are gently massaged after the administration of the drug. The patient must spit out all the impurities that reach his mouth. Swed karma should be repeated after Nasya treatment.

Mode of action – Nasya Karma

The nasya dravya medicine acts at sringataka marma, from where it spreads into various strotasas (vessels & nerves) and brings out all the vitiated doshas.

The drug by general blood circulation after absorption through mucous membrane, direct pooling into venous sinuses of brain through inferior ophthalmic veins. Absorption directly into the cerebrospinal fluid, Many nerve endings which are arranged in the peripheral surface of the mucous membrane, olfactory, trigeminal are stimulated by the nasya karma and impulses are transmitted to the central nervous system.

Most of the drugs used in nasya karma have Katu, Ushna and teekshna properties. These drugs produce dravukaranam (liquefaction) and Cheedanam (expulsion) of vitiated doshas.

The Kashayarasa (astringent taste) drugs produce astringent affect, madhura rasa (sweet) drugs produce a cooling and nourishing effect.

CONCLUSION

Disorders of the facial nerve, including paralysis are not rare and have a variety of potential causes. The appropriate diagnosis and treatment are very important for achieving the best possible recovery of facial nerve function.

Patient suffering from Bell's palsy will benefit from specific panchakarma therapy like Nasya, designed to improve physical functioning as well as social wellbeing of patient the administration of nasya along with drugs during early stage of the disease help in preventing the occurrence of any residual impairment in the patient thus improving the treatment outcome.

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