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AYURVEDIC MANAGEMENT OF MUKHPAK WITH SPECIAL REFERENCE TO STOMATITIS

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ABSTRACT

Mukhapaka is a commonest disease of mukha found in India as well as all over the World. In this condition mukha is affected by paka process which is always associated with pitta dosha. Due to ulceration irritation, pain, burning sensation is experienced when patient take food. Sometimes liquid intake also becomes troublesome as cold or hot sensation gives lot of pain burning sensation etc. It may also occur because of chewing of chemical agents like Tobacco-Gutakha, Insomnia, Vitamin deficiency, much life threatening disease like Malignancy, Submucosal fibrosis, Skin disease and disturbances in G.I. tract like Constipation. In modern medicine, several mouth paints and mouth gargles are used for the treatment of Aphthous ulcer adjuvant to steroids, B'Complex group of drugs and various other treatments like injection placentrex (sub mucosal) which have their own limitations. Therefore, an attempt was made to collect all medicinal drugs which are mentioned in Ayurveda Classics for treatment of this disease.

KEYWORDS: Mukhapaka, Oral hygine, Stomatitis.

INTRODUCTION

Oral hygiene plays an important role in every individual. But due to so many vitiating factors like tobacco chewing, smoking, stress, vitamin deficiency, allergic and trauma leading to the vatadi dosha and produce 67 Mukha Rogas. Nearly 20% of the population is suffering with this problem. The estimated point prevalence of oral ulcers worldwide is 4%, with aphthous ulcers being most common, affecting as many as 25% of the population worldwide.

Among the Mukharogas "Mukhapaka" comes under Sarvasara Mukharogas. It is considered as Pittaja Nanatmaja and Rakta Pradoshaja Vikara characterized by Vedana Yukta Vrana in the Mukha Kuhara. Mukhapaka is Pittaja Nanatmaja and Rakta Pradoshaja Vikara it once again does the Pitta Prakoapa along with Rakta.

The symptoms of *Mukhapaka* can be correlated with stomatitis. It is an inflammation of the mouth and lips. It affects the mucous membranes of the mouth and lips, with or without ulceration. In widest meaning, stomatitis can have a multitude of different causes. The commonest causes which include infections, nutritional deficiencies, allergic reactions, radiotherapy

etc.^[1] Food is the factor which sustains & supports the dhatu oja & bala i.e. strength or capacity to perform physical work. Food is a basic requirement of the body. Food in any form either liquid or solid is very essential for growth of body and maintenance of health. Restriction of food by any reason can create a serious condition. The disease Mukhapaka can occur if it is neglected or not treated properly. *Mukhapaka* is a common disease of the oral cavity. [2] It affects patient's daily routine. It is found more in pitta pradhan dosh, pitta pradhan prakruti & pittaj kala. It is more found in India because people are more prone to have pitta prakopak ahar like spicy oily food, tobacco chewing, smoking, alcohol consumption etc. and also pitta prakopak vihar like late night sleeping, improper timing of meals etc. Due to the paka process, ulcers & inflammation over affected area is seen in mukha. [3] There are various causes which create Mukhapaka like rapidly increasing problems. [4] Hence directly increasing poverty proportionally this has brought illiteracy, ill health with it. Because of malnutrition anemia stomatitis can occur. Bad hygiene is one of the major reasons which are very common in poor & uneducated class.^[5] Also alcohol consumption, tobacco; gutka chewing is very common in them. All the above

mentioned causes create stomatitis which is very common in our country. $^{[6]}$

In modern medicine there is no specific treatment for *stomatitis*. Combinations of antibacterial & anti-inflammatory are generally used in form of paste, gel or solution for gargles, which gives symptomatic relief by cooling soothing effect. In Ayurveda, the treatment modalities include *Panchakarma*, external therapies, internal medications, Activities, Advice of food and life style changes. Panchakarma: Virechana Activities: Specific *Asana*, *Pranayamas*, meditation Food: Improving on the intake of water preferably warm water and food which helps digestion. Avoid spicy, dry, deep fried and heavy foods that are difficult to digest.

AIM AND OBJECTIVES

Aim

• To evaluate the role of Ayurveda in management of *Mukhpaka*.

Objective

- To study the concept Mukhpaka
- To study the *chikitsa* of *Mukhpaka* as per Ayurveda.
- To study the concept of stomatitis

MATERIALS AND METHODS

Ayurvedic textual materials were referred mainly Charaka samhita, Sushruta samhita, Astanga hridaya

and available commentaries of these samhitas for the study.

MUKHAPAKA

Mukhapakaa is one of the mukharoga and occurs in all over the oral cavity Acharya Kashyapa; Charak has described it as Mukhapakaa, while Acharya Sushruta and Acharya Vaghbhata have described it as Sarvasara. Sarvasara means the disease which have capacity to spread all over the buccal mucosa.

Causes of *Mukhpaka*^[8] Causes of *Mukhapakaa* can be differentiated as:

- 1) Dosha dushtikar hetu
- 2) Sthan vaigunyakar hetu

1) Dosha dushtikar hetu

It includes aharaj hetu which causes aggrevation of *Pitta Doshas* in Amashaya and causes *Mukhapakaa*. Hetus like *Mansahar, dugdhahar, Ikshuvikruti* causes vitiation of *doshas* in *Amashaya* and there by causing Mukhapakaa. These food factors causing *piita kaph dosha* vitiation and rakta *dhatu dushti* are given below,

Underlying factors from food

Name	Aggrevated Doshas	Dhatu Dushti
Flesh of Buffalo	Kapha	-
Fish	Kapha, Pitta	Rakta
Pork	Kapha	-
Amak	Kapha, Pitta	-
Moolak (Riped)	Tridoshakrit	-
Black Grams Raddish	Kapha	-
Milk (Buffalo)	-	-
Curd	Kapha, Pitta	Meda
Sookta	Kapha, Pitta	Tridoshakrit, Rakta
Juice of Sugarcane	Kapha	=
Fanita	Tridoshakrit	Shukra

2) Sthan vaigunyakar Hetu^[9]

It mainly consists of *viharaj hetu*, these causes aggrevation of doshas in *Mukha*. In case of sleeping in prone position collection of *prakupit doshas* in oral cavity leads to *Mukhroga*.

Same like that in kawal and gandush atiyoga (Milk regurgitation and excessive frothing) irritates oral mucosa and further may lead to *Mukhapaka*. If *vaman* and *Raktamokshana* are not done in proper *ritu*, Then it causes accumulation of *doshas in mukha*, which are to be thrown out of the body regularly by the cleaning process of *vaman* and *Raktamokshana*, otherwise that causes *Mukhapakaa*.

STOMATITIS

Stomatitis is an inflammation of the mucosa of the oral cavity. It is an inflammation of the lining of the mouth.

Causes

Stomatitis can be caused by local and systemic cause. Such inflammation of the mouth may be caused by: Injury, Mechanical, Chemical, Thermal, Radiotherapy, Idiopathic, Malnutrition etc.

Types of Stomatitis

(A) Traumatic Stomatitis

Traumatic stomatitis is commonly caused by Vigrous used of hard tooth brush, Ill-fitting dentures, Jagged teeth

Simple cut or burn of the mouth, Thermal and radiation injury.

Clinical Features

The lesion is painful. The mucosa is ulcerated and hyperaemic. The tongue is quoted with fur. Simple cut or burn of the mouth usually heals by itself. Traumatic stomatitis is soon covered by the thin grey glistening coagulum. As the mouth is painful, movements are obviously restricted, salivation is increased.

(B) Infective Stomatitis

(1) Viral Stomatitis: It is caused by herpes simplex or herpes zoster virus. It is characterized by small, multiple, painful vesicles on the lips, buccal mucosa and palate. (2) Bacterial Stomatitis: Vincent's Angina: Vincent's Angina is also called as ulcerative stomatitis and also Acute ulcerative gingivitis. Causative Organism: Borrelia Vencenti and B. fusiformis are responsible to cause this lesion. Both these organisms may be found in normal mouths, but are particularly found in large numbers in association with this disease.

Clinical Features

- 1) Early adult individuals are more often involved. It is rarely seen after the age of 12 years.
- 2) Acute condition starts with prodromal symptoms e.g. malaise, pyrexia and increased salivation.
- 3) After about a couple of days of such prodromal symptoms patients complain of dull toothache and gum bleedings
- 3) Fungal Stomatitis: It is the prototype of oral infection caused by yeast like fungus. It is the superficial infection of upper layer of oral mucous membrane and results in formation of patchy white plaque or flecks on mucosal surface. Such type of stomatitis is seen in People suffering from debilitating disease., As a complication of prolonged antibiotic therapy, which changes the balance of bacterial flora in the alimentary canal. and In Diabetic patients. This condition mostly occurs due to fungus known as candida albicans.

(C) Aphthous Stomatitis

Aphthous stomatitis is also called as Recurrent ulcerative stomatitis. It is common disease characterized by development of painful, recurrent, solitary or multiple uncerations of the oral mucosa.

(E) Angular Stomatitis

Cracks or superficial ulceration at the corners of the mouth is known as angular stomatitis. Angular stomatitis is also called as Cheilosis or Preleche.

(F) Stomatitis With Malnutrition

Various types of stomatitis often remain associated with malnutrition. The mucosa of the tongue may undergo atrophy. Similarly thinning of the oral mucosa makes the mouth most susceptible to trauma, hot drinks and spices

Chikitsa of mukhpaka Nidan Parivarjan

Nidan parivarjan chikitsa is of prime importance to arrest further progress of disease.

General treatment of Mukharoga^[10]

Chakradatta mentioned that in Mukhapaka we can use Darvirasakriya with honey for local use for healing of ulcers. In every type of Mukhpaka we can use kwath of Triphala, Patha, Mridvika and leaves of Jati with Honey for Mukhdhayan.

- 1) Kawal Gandush-In both these upkramas medicine are held in oral cavity, the only difference in these two types is the amount of drug held in the mouth. In Gandush the mouth is filled with medicine so that it can not be moved (i.e. amount is more), where as in kawal the amount of medicine is less so that it can be moved in the oral cavity.
- 2) Raktamokshan: Raktamokshan means drainage of vitiated blood outside the body. Local *Raktamokshan* is one of the ashuphaldayee chikitsta in *mukhrogas*. It directly acts on dushita *rakta dhatu*. Removal of dushita rakta pacifies all the symtoms of mukharoga and give instant relief.
- 3) Nasya: Nasya is important treatment in urdhvajatrugat (above neck region) vikara and Mukhapakaa is one of the them.

SYSTEMIC TREATMENT

- 1) *virechan.* -*Virechan* is chief treatment for Pitta Dosha and it also causes *Raktadhatu prasadan*. It normalises the path *of Vata dosha* which further leads to correct constipation, hence breaking the pathogenesis of *Mukharoga*.
- 2) Shirovirechan: Shirovirechan is the procedure for elimination of vitiated doshas chiefly accumulated over neck region (urdhvajatru). As it is the nearest route to eliminate those doshas, therefore advisible in mukharoga.

PATHYAPATHYA

पथ्य	अपथ्य
स्वेदन,विरेचन, वमन, कवल, गण्डूष, प्रतिसारण, धूम, नस्य	दन्तधावन
यव,मुद्ग,कुलत्थ,जाङ्गल मांसरस	मत्स्य, आनूप मांसरस , दधि, गुड, क्षीर, माष, रूक्षान्न
कारवेलक, पटोल, बालमूलक	गुरु, अभिषयन्दि भोजन
कर्पूरनीर, ताम्बूल, घृत, तिक्त & कटु रस	अधोमुखेन शयन, दिवास्वप्न

PATHYA

In all oral diseases following *dravyas* are recommended in *ahar* Old rice, Wheat, Bean, Horsegram, Bittergour, Serpantgourd, Radish, Camphour water, Tambul, Khadir-ghruta things etc. having Katu and Tikta rasa, As we go through the gunas of this dravyas all are tikta rasatmak and sheet veerya therefore usefull in Kaph Pittaj vyadhi.

APATHYA

In all oral diseases following things are contraindicated curd, milk and its derivatives, guda, sweets, black gram, As we go through the *gunas* of above *dravyas*, all are *ushna veeryatmak* causing vitiation of *pitta dosha* in the *samprapti* of Mukhapaka. Non-oily things are heavy to digest and *abhishyan*di edible by infant's mother should be avoided. So other *hetus* which causes *Mukhapakaa* should be avoided.

DISCUSSION

Mukhapakaa is a chronic disease which is occurs in all parts of the oral cavity like, osta, jihwa, taalu, kapola, gala characterized by ruja, daha, raktavarnata etc.

There are 3 types of *Mukhapakaa* according to *acharya* Sushruta which is *Vataja*, *Pittaja* and *Kaphaja*. Commonly *pittaja Mukhapakaa* is more seen in daily practice. Also *Mukhapakaa* is one of the *pittaja nanatmaja vyadhi*. So, due to the vitiation of *pitta vrana* and *paka* were produced. Also *Mukhapakaa* is a one of the *Rakta pradoshaja vyadhi*. So, *Rakta* is also play a vital role in its pathogenesis.

In treatment of *Mukhapakaa Bahya* and *Abhyantara* treatment was mentioned.

In this study, efforts were made to use *Ayurvedic* drug which is cost effective & alternative treatment for modern line of treatment of *Mukhapakaa*.

Stomatitis has become very common problem in the present era. It is very important to have effective, economic & without any side effect, medicine on it.

Mukhpak is one of the commonest oral diseases in India.

Mukhpak is found in all the age groups.

Mukhpak is found more in pitta –prakruti persons.

CONCLUSION

These natural products are effective medications can be used for the treatment of Oral diseases like stomatitis. These remedies are being practiced in ancient times and are cost effective and easily available. Natural disinfectants which are mentioned above are also effective and act as antimicrobial agents, if these medications are given in proper dose than they have tremendous result.

Nidana explained in Ayurvedic classics seems to be initiating or precipitating Samprapti of Mukhapakaa is not mentioned directly, but the Samprapti mentioned for Mukha Rogas is considered. As various known, unknown, exogenous, or endogenous etiological factors are involved in the pathological process.

REFERENCES

- 1. Text book of diseases of Ear-Nose-Throat by K.B. Bhargav, S.K Bhargav, and T. M. Shah, 6th Edition, Chapter No. 37, Page No. 211.
- Charak samhita by Agnivesh, Chakrapani Tika, Chaukhamba orientela 1984, edited by Yadavji Trikamji Acharya, Chaukhamba prakashana, Varanasi, Edition: Reprint 2009, Chikitsa shana 26, page No. 889.
- 3. Sushrut Samhita of Sushruta with Nidan Sangraha commentary of Shri. Dalhanacharya & Nyaya Chandrika Panjika of Shri. Acharya on Nidansthana, edited by Yadavji Trikamji Acharya, Nidanasthana 16, page No. 314.
- Madhav Nidan by Madhavkara- with commentary of Madhukosh by Vijayrakshit & Shrikanthadatta with extracts from Atankdarpan by Vachaspati Vaidya, edited by vaidya Yadhavji Trikamji Acharya-1955.
- 5. Text book of diseases of ear-nose-throat by P.L. Dhingra. Page No. 202, 4th Edition.
- 6. Text book of diseases of Ear-Nose-Throat: Dhingra, 2nd Edition, B.I. Churchill Living Stone Publication at New Delhi, Chapter no.42, Page No.215.
- Text book of diseases of Ear-Nose-Throat diseases by Dr. Mohammad Maqbool, Jaypee brother medical publishers 1993, 6th Edition, Chap-41, Page No.328.
- 8. Vagbhatta's Ashtanga Hridayam, Vol. 3 (Uttar sthan), translated by Prof. K.R. Srikanth Murthy, Edition Reprint-2006, and published by Chaukhamba Krishnadas Academy, Varanasi, U.P. India, Chapter 22, 184-197.
- 9. Susruta Samhita of Sushruta, Vol. 1 & 2, translated by Prof. K.R. Srikanth Murthy, Edition Second-

- 2004, published by Chaukhamba Orientalia Publication, Varanasi, U.P. India, Nidansthan Chapter 16Page no. 563 & Chikitsasthan Chapter 22Page no. 204-215.
- Sharma PV. In: Charaka Samhita: Sutrasthanam. 23rd ed. Ch. 20, Stanzas 11-13. Sharma P, editor. Varanasi, India: Chaukambha Orientalia; 1981 pp. 112-4.