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Case Study

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EFFECT OF HARITAKI KASHAYA PANA IN THE MANAGEMENT OF TUNDIKERI IN CHILDREN WITH SPECIAL REFERENCES TO **CHRONIC TONSILLITIS - CASE STUDY**

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ABSTRACT

Tundikeri is one of the mukhroga. Tundikeri can be correlated with chronic tonsillitis which presents like karpasiphalsannibha (Resembling fruit of cotton), picchilata (exudate over tonsils or congestion), mand- ruk(throat pain), kathin shoth(inflamed tonsils) similar features are seen in chronic tonsillitis with including difficulty in swallowing, halitosis etc. Tonsillitis is more common below 15 years of age. Incidence 7% of all visits to the Pediatrician. Tonsillitis is the disease of upper respiratory tract infection which shows symptoms sore throat, high fever, inflamed tonsils, difficulty in swallowing, throat pain, red and swollen tonsils with yellow spots of purulent material at the opening of crypts on the surface. In Ayurveda text treatment of *Tundikeri* mentioned as in various forms like nasya,

gandush (gargaling), pratisaran (local drug application), abhyantar pana etc. Haritaki Kashaya pana with makshika (honey) as anupana this treatment is mentioned in kanthgat roga chikitsa by Acharya Vagbhata. This treatment is cost effective, economical and easy to take for patient and safe practiced drug. Haritaki kashaya with makshika acts as analgesic, anti-inflammatory in tundikeri disease. It helps to reduce tonsillar swelling, get relief from throat pain, reduced exudates from inflamed tonsils. Hence this drug is effective in chronic

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tonsillitis. According to *Acharya Vaghbhata* start the treatment of *kanthgat roga* as early as possible, because *kanth* is *pran marga* (respiratory track) so delay in treatment may harm respiration. So its need to do early treatment for *kanthgat roga*.

KEYWORDS: *Tundikeri, Mukhroga, Haritaki kashaya*, Chronic tonsillitis.

INTRODUCTION

Kaumarbhritya deals with the study of nutrition, growth, development in children, improve the quality of mother milk. And related to their disorders caused because of vitiated mothers milk and *Graha*.^[1]

Kaumarbhritya has been considered as an important specialty in Ayurveda. The word *Kaumarbhritya* is composed of two words *kumara* and *Bhritya*. The word "*Kumara*" was used in Vedas, in the sense of child, boy, youth, son, etc. Various terms have been used for this during the ancient period, *kaumarbharityakam* (Charak), *Kaumarbhritya*, *Kaumarbhritya Tantra* (Sushruta, and Kashyapa).

Tundikeri disease is explained under kanthgat roga by Acharya Vagbhata and under talugat roga by Acharya Sushruta. Tundikeri can be correlated with chronic tonsillitis which presents features like karpasiphalsannibha(Resembling fruit of cotton), picchilata (exudate over tonsils or congestion), mandaruk (throat pain), kathin shoth (inflamed tonsils) similar features are seen in chronic tonsillitis with including difficulty in swallowing, halitosis, etc.

The presenting data evolves need to understand the causative factors and pathogenesis of tundikeri. The disease Tundkeri described in classics as kapha-raktaja dominant condition. Here, ayurvedic treatment has a specific utility in the management of Tundikeri.

Tonsillitis is more common below 15 years of age. Incidence 7% of all visits to the pediatrician Tonsillitis is the disease of upper respiratory tract infection which shows symptoms sore throat, high fever, inflamed tonsils, difficulty in swallowing, throat pain, red and swollen tonsils with yellow spots of purulent material at the opening of crypts on the surface. In *Ayurveda* text treatment of *Tundikeri* mentioned as in various forms like *Nasya*, *Gandush* (gargling), *Pratisaran* (local drug application), *Abhyantar Pana*, etc.

According to *Acharya Vaghbhata* start the treatment of *kanthgat roga* as early as possible because *Kanth* is *pran marga* (respiratory track) so the delay in treatment may be harmful to respiration. So it needs to do early treatment for *kanthgat roga*.^[2]

Tonsillitis is an infection of tonsils that are located in the throat. Group A- β Haemolytic streptococcus is the most clinically important bacterial pathogen for tonsillitis as it may cause rheumatic fever. Treatment started within 9 days after the onset of symptoms will prevent rheumatic fever.

Ayurvedic texts have mentioned several therapies and medicines to combat this ailment like Nasya, Kavala, Gandusha, Pratisarana, and Shastrakarma, etc. The practice of Chewing a Tablet (Vati) for Mukhagata roga is also specified in classics.

Ayurvedic medicine is economical, cost effective & very much helpful to break pathogenesis with the relief of signs & symptoms preventing complications.

Here we took up to study haritaki *kashaya pana* with *makshika* to come out the effective remedy for *Tundikeri*. This treatment is cost-effective, economical, and easy to take for the patient and safe practiced drug. As we all know everyone trying for conservative medicinal management of disease to avoid operative options.

Haritaki acts as an anti-inflammatory, analgesic, *tridoshaghna*, *vranropana*, *vranshodhana*. *Makshika* (*honey*) acts as *yogvahi* and *chedana*. By using this therapy we can reduce the need for tonsillectomy and its further complications.

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Haritaki acts as an anti-inflammatory, analgesic, tridoshaghna, vranropana, vranshodhana. Makshika (honey) acts as yogvahi and chedana. By using this therapy we can reduce the need for tonsillectomy and its further complications.

AIM

To study the efficacy of 'Haritaki kashaya' in the management of Tundikeri in Children.

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OBJECTIVE

Evaluating efficacy of *Haritaki kashaya* in the management of *Tundikeri* in children.

MATERIAL AND METHODS

To fulfill the aim and objectives of the study this work has been carried out in the following phase wise manner.

- 1. Conceptual study
- 2. Case study
- 3. Discussion
- Result and Conclusion.

1. Conceptual Study

Tundikeri disease is explained under kanthgat roga by Acharya Vagbhata and under talugat roga by Acharya Sushruta. Tundikeri can be correlated with chronic tonsillitis which presents features like karpasiphalsannibha(Resembling fruit of cotton), picchilata (exudate over tonsils or congestion), mandaruk (throat pain), kathin shoth (inflamed tonsils) similar features are seen in chronic tonsillitis with including difficulty in swallowing, halitosis, etc.

Tonsillitis is more common below 15 years of age. Incidence 7% of all visits to the pediatrician Tonsillitis is the disease of upper respiratory tract infection which shows symptoms sore throat, high fever, inflamed tonsils, difficulty in swallowing, throat pain, red and swollen tonsils with yellow spots of purulent material at the opening of crypts on the surface. In Ayurveda text treatment of Tundikeri mentioned as in various forms like Nasya, Gandush (gargling), Pratisaran (local drug application), Abhyantar Pana, etc.

Haritaki Kashaya

Ayurvedic Properties^[7]

Rasa : Pancharas except for Lavan ras

Guna : Laghu, Ruksha,

Veerya : Ushna Vipaka : Madhur

Doshaghnata:Tridoshaghna

Karma

According to Bhavprakash Samhita-

Deepana, Medhya, Rasayana, Chakshushya, Bruhana, Anulomak.

➤ According to Acharya charaka^[44]

Anulomak, Deepana, Pachana, Aushya, Vayasthapana, Balya, Strotoshodhana, Hrudya.

➤ According to Acharya Sushrut^[8]

Vranropana, Vranshodhana Sara, Medhya, Deepana, chakshushya, Vedanahara, Shothahara, Amadoshanashaka, Kanthya, vrushya,

Rogaghnata

1) According to Bhavprakash Samhita-

Kas, Shwasa, prameha arsha, kushtha Shotha, vaiswarya, grahani, vibandh, vishamjwar, gulma, adhman, trusha, chardi, hikka, kandu, hrudrog, Kamala, shul, anah, ashmari, mutrakruchha, mutraghat.

2) According to Acharya Sushrut

Vran, shoth, kusth.

3) According to Acharya Charaka^[9]

Kushtha, gulma, udavart, shoth, pandu, mad, arsh, grahani, vishamjwar, shirorog, atisara, arochak, kas, prameh, anah, udar, krimi, kaphprasek, chardi.

Effect on rasvah srotasa - By dipana pachana, guna haritaki helps to improve aruchi, agnimandya, jwar symptoms.

Effect on raktvah srotasa - Acts as shothhara, shonitsthapana. It helps to reduce swelling which is seen in *Tundikeri*.

Effect on *pranvah srotasa* - Acts as kaphaghna, kasghna, shwasaghna, etc.

Chemical composition^[10] - Tanin, chebulogic acid, chebulinic acid, Corilagin, 18 aminoacid.

Pharmacological activities^[11] - Antibiotic, vasoconstrictor, anti-inflammatory, Analgesic, cardiac stimulating, insecticidal, Antifungal, antipyretic.

2. CASE STUDY

This study includes 30 patients taking 'Haritaki kashaya' for the management of Tundikeri. It was done with the help of proper randomization and following Criteria-

Inclusion criteria

- 1) Children from 5 to 12 years irrespective of gender and socioeconomic status.
- 2) Patients presenting with two or more symptoms of Tundikeri like Kathin shotha, Mandruk, Picchilata, etc.

Exclusion criteria

- 1. Any indication of tonsillectomy likes recurrent acute attacks, quinsy, Tonsillolith, etc.
- 2. Patients having any other systemic disorder.
- 3. Patients below 5 years of age and above 12 years of age.
- 4. Patients having body temperature more than 100 F^0 .

Diagnostic criteria: - Patients having clinical signs and symptoms of *Tundikeri* with special reference to chronic tonsillitis.

According to Ayurveda

- 1. Karpasiphalsannibha
- 2. Picchilata
- 3. Mandruk
- 4. Kathin shoth
- 5. Daha, tod, prapaki.

According to Modern Science

- 1. Sore throat
- 2. Inflamed tonsils
- 3. Throat pain
- 4. Exudate over tonsils
- 5. Difficulty in swallowing
- 6. Halitosis
- 7. Yellowish spots of infected cheesy material are seen on the medial surface. Fever, cough, malaise, headache

Withdrawal criteria

- 1. The occurrence of serious adverse effects and aggravation of disease symptoms which requires urgent treatment will be treated accordingly.
- 2. The patient is not willing to continue the trial or to follow the assessment schedule.

Investigations

CBC: (Complete Blood Count) for Neutrophils %

- Neutrophils are a variety of white blood cells and one of the immune system components responsible for combating certain infections.
- Normal range-45 -75 % Neutrophils - seen in bacterial infections, inflammatory conditions, etc.

Table No. 1: Overall assessment criteria.

Complete Remission	100% relief in signs and symptoms
Marked Improvement	>76% & <99% relief in sign and symptoms
Moderate Improvement	>51% & < 75% relief in sign and symptoms
Mild Improvement	>26% & <50% relief in sign and symptoms
Unchanged	< 25% relief in sign and symptoms

Table No. 2: Drug administration detail: Dose & Duration.

	Haritaki Kashaya
Dose	According to Youngs formula
Time	2 times in a day
Route	Oral route
Anupan	Makshika
Duration	15 days

Table No. 3: Total No. of relieved and not-relieved patients on 30th day of Rx.

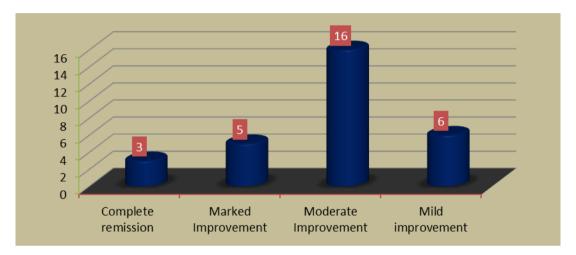
Croun	Relieved(Upashaya)		haya)	complete remission	Total
Group	Alpa	Madhyam	Uttam	(sampurna upashaya)	rotai
Group A	06	16	05	03	30
	(20%)	(53.33%)	(16.66%)	(10%)	(100%)

The table shows that 10% of patients have sampurna upashaya. 16.66% of patients had Uttam upashaya. There were a huge number of patients who had madhyam upashaya i.e 53.33% and 20 % of patients had alpa upashaya.

OVERALL ASSESSMENT

Table no. 4: Overall Assessment.

Sr. No.		N	%
1.	Complete remission (Cured)	3	10
2.	Marked Improvement	5	16.66
3.	Moderate Improvement	16	53.33
4.	Mild improvement	6	20
5.	Unchange	00	00
	TOTAL	30	100



GRAPH: OVERALL ASSESSMENT.

3. DISCUSSION

In those 30 patients of *Tundikeri* (Chronic Tonsillitis) symptoms like Sore throat, inflamed tonsils, Throat pain, Exudate over tonsils, Difficulty in swallowing, Halitosis, Fever, cough, malaise, headache the test has shown significant reduction.

The drug used for *Tundikeri* (Chronic Tonsillitis) *Haritaki Kashaya pana* with makshika (honey) as anupana this treatment is mentioned in kanthgat roga chikitsa by Acharya Vagbhata. This treatment is cost effective, economical and easy to take for patient and safe practiced drug. Haritaki kashaya with makshika acts as analgesic, anti-inflammatory in tundikeri disease. It helps to reduce tonsillar swelling, get relief from throat pain, reduced exudates from inflamed tonsils. Hence this drug is effective in chronic tonsillitis. According to Acharya Vaghbhata start the treatment of kanthgat roga as early as possible, because kanth is pran marga (respiratory track) so delay in treatment may harm respiration .So its need to do early treatment for kanthgat roga. In case of all the parameters, the statistical evaluation revealed that there was a significant reduction in signs and symptoms; hence the treatment is significantly effective in *Tundikeri* (Chronic Tonsillitis).

CONCLUSION

- Tundikeri can be co-related with Chronic Tonsillitis.
- Haritaki Kashaya is effective in the management of Chronic Tonsillitis.
- *Haritaki kashaya* showed an effect in patients with mild improvement 6, moderate improvement in 16 patients, marked improvement in 5 patients, Along with that complete remission of 3 patients was observed.
- Haritaki kashaya was found effective in reducing subjective parameters like kathin shoth, mandruk, picchilata, difficulty in swallowing, halitosis.
- It was statistically observed that *Haritaki Kashaya with makshika was* significantly effective to reduce all subjective and objective parameters.

REFERENCES

- 1. Vaidyaraj Datto Borkar, Sushrut *Samhita*, Rajesh Prakashan, Pune, 2, *sutrasthan verse* 1/7/5.
- 2. Dr. Anna kunte, Pandit Krushnshastri Navare, Pandit Hari Sadashiv Shastri Paradkar, Ashtanghridayam Chaukhamba, Sanskrit Sansthan Varanasi, 2015; 858. *uttersthan* verse 22/111.
- 3. Dr. Brahmanand Tripathi, Charak samhita vol-1, Chaukhamba Surbharati Prakashan, Varanasi, 2011; 925, sharirsthan verse- 7/11.
- 4. Vaidyaraj Datto Borkar, Sushrut samhi*ta*, Rajesh Prakashan, Pune, 365, *sharirsthan verse* 9/12.
- 5. Acharya priyavat Sharma, Dravyagun Vigyan, Chaukhamba Bharati academy, 2013; 753.
- 6. Shree Brahmshankar Misra, Shree Rupalalji Vaisya, *Bhavprakash*, *Vol 1 Chaukhamba Sanskrit Bhavan*, 2007; 4,5, *nighantu bhag. haritakyadi varga*.20,21.
- 7. Shree Brahmshankar Misra, Shree Rupalalji Vaisya, *Bhavprakash*, *Vol 1 Chaukhamba Sanskrit Bhavan*, 2007; 4,5, *nighantu bhag. haritakyadi varga*.20,21.
- 8. Vaidyaraj Datto Borkar, Sushrut *Samhita*, Rajesh Prakashan, Pune, 227, *sutrasasthan* verse 46/199.
- 9. Pandit kashinath shastri, Dr gorakhnath chaturvedi, Charak samhita, chaukhamba bharati academy, 2012; 10, *chikitsasthan* verse-01/32-33.
- 10. Said Muhammad, The morphology, extraction, chemical constituents and uses of

Terminalia chebula-A review, journal of medicinal plants research, 29 August 2012; 6(33): 4772-4775.

11. Aparna Upadhyay, pooja agrahari, International Journal of pharmacology, 2014; 10(6): 289-298.