

## CLINICAL STUDY TO EVALUATE EFFICACY OF *AHARDRAVYA NAVNEET KHANDAM* IN CASE OF *MUKHARDITA* (BELL'S Palsy)

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Article Received on  
24 December 2021,

Revised on 13 Jan. 2022,  
Accepted on 01 Feb. 2022

DOI: 10.20959/wjpr20222-23116

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## INTRODUCTION

Ayurveda holistic science of life has always emphasized to maintain the health and prevent the diseases by following proper diet and lifestyle regimen rather than treatment and cure of the diseases. In present era each and every person has to face cut through competition in each field of life. This leads to anxiety which is an important aggravating factor of *Vata Dosha* according to *Ayurveda*. *Vata* is the control factor for the mechanism of mind and body. Moreover the fast life style, irregular food habits and lack of rest also aggravate '*Vata*' *Dosha*, thus the ratio of *Vatavyadhi* is increasing day by day. *Ardita* is one of the *Vata Vyadhies* which is caused by aggravation of *Vata*.

*Ardita* has been enlisted amongst the eighty types of *Nanatmaja Vata Vyadhies*. The vitiation of *Vata* especially aggravation of *Vata* causes '*Ardita*' as mentioned in almost all Ayurvedic classics. Acharya Charak has included *Sharirardha* in *Ardita* while Sushruta has considered only face or upper part of the body is affected in *Ardita*. *Ardita* on the basis of its signs and symptoms mentioned in text can be co-related with facial nerve paralysis.

It is the common problem that involves paralysis of any structures innervated by the facial nerve. Pathway of facial nerve is long relatively convoluted and so there are a number of causes that may result in facial nerve paralysis such as congenital, toxins, traumatic, pregnancy, Bell's palsy etc. The most common is Bell's palsy, an idiopathic disease that may only diagnose by exclusion. Here, temporary suspension or permanent loss of function, especially loss of sensation or voluntary motion of unilateral side of face is considered which leads to partial or total loss of movement of unilateral face. Actually facial paralysis leads to

a disability of interaction by loss of facial expression, which is a major part of human communication. It may recur or leave synkinesis. Modern science found drugs like steroid and Anti virals etc. for it, also surgical and other treatments are available for facialparalysis. Yet, its recurrence and synkinesis also reported.

To prevent such complication, give patient good result as early as possible & prevent unnecessary medication, various *Pathyaa Ahardravyas* describe in *Samhita*, one of them is *Navneet&Khandam*. *Vagbhata* in *Agryasangraha* mentioned *Navneeta Khandam* asbest remedy for *Ardita*.<sup>[1]</sup>

## AIM AND OBJECTIVES

**Aim:** To study curative efficacy of *Navneet Khandam* in case of *Mukhardita* (Bell`s palsy).

**Objective:** to establish importance of proper diet in curing *Mukhardita* (Bell`s palsy).

**Type of Study:** Prospective open labelled randomized control clinical trial.

## MATERIALS AND METHODS

### A) Selection of cases

Patient fulfilling the criteria and attending the OPD/IPD of the Kaychikitsa Department, Vidarbha Ayurved Mahavidyalaya and shri. Gopal Nanji Tank Rugnalaya, Amravati will be selected for the present study irrespective of Age, sex, religion etc.

### B) Inclusive criteria

- i) Patient between ages 16 to 70 yrs. were selected.
- ii) Patient having sign & symptoms of *Ardita* (particularly *Mukhardita*) were selected.

### C) Exclusion criteria

- i) ANC women & lactating mother
- ii) Patient suffering from.
  - a) Cardiac disease
  - b) Malignancy
  - c) Tuberculosis
  - d) Renal failure
  - e) Hepatitis
  - f) Bronchitis & other serious illness requiring emergency management.
  - g) D.M. (Diabetic mellitus)

h) Any Serious Complications during treatment will be excluded.

#### D) Consent

A well informed written consent of all patients, included in study, will be obtained before starting treatment.

#### E) Administration of Drug

- Duration of treatment - 60 days.
- All 35 patients will be given *Mahayogaraj Guggulu 500 mg + Navneet 10 g & Khandam 10g*, for 30 days Orally for first 30 days & observation will be taken at 10<sup>th</sup>, 20<sup>th</sup> & 30<sup>th</sup> day.
- Then only *Navneet 10g & khandam 10g* TDS orally given for next 30 days & observation will be taken on 40<sup>th</sup>, 50<sup>th</sup>, & 60<sup>th</sup> day.

#### F) Trial drug

i) *Navaneet* (Butter of cow milk)

ii) *Khandam* (cane suger)

#### D) Method of Preparation

Special cane sugar locally called khadi sakhar is used in powder form & same amount of Butter is thoroughly mixed & this Prepared *Navneet Khandan* is used for Administration.

#### ❖ Criteria For Assessment

##### Objective criteria.

- *Mukhavakrata*

(Distance from pintrum to the angle of mouth)

	Condition	Grade	Score
1	Affected & Normal size Are equidistant	0	0
2	Distance of affected side less than 0.5 cm	1	10
3	Distance of affected side 0.5cm	2	20
4	Distance of affected side is more than 0. 5 cm.	3	30

##### 2) Subjective criteria

- *Netrastabdata*

	Condition	Grade	Score
1	Complete closing of eye	0	0
2	¾ th closing of eye	1	10

3	1/2th closing of eye	2	20
4	1/4th closing of eye	3	30

- Vaksanga**

	Condition	Grade	Score
1	Normal speech	0	0
2	Poor /inadequate clarity of speech which can understand	1	10
3	Very poor clarity of speech which cannot understand	2	20
4	No speech	3	30

- Lalastrava**

	Condition	Grade	Score
1	No dribbling of saliva	0	0
2	Drop like saliva	1	10
3	Mod.quality of saliva	2	20
4	Continues flow of dribbling	3	30

- Vedana**

	Condition	Grade	Score
1	No pain	0	0
2	Bearable pain requires no medicine	1	10
3	Un-Bearable pain relived by medicine	2	20
4	Un-Bearable pain not relived by medicine	3	30

- Greevaupvartan**

	Condition	Score
1	Absent	0
2	Present	10

- Chalshira**

	Condition	Score
1	Absent	0
2	Present	10

- Total effect of therapy**

Percentage of relief in symptoms and sign with respect to each patient is classified as per definition described of marked improved, moderate improved, no improvement.

Category	% of relief in sign and symptoms
Marked improvement	50 % & above
Moderate improvement	40% - 50
Mild improvement	30% – 40%
No improvement	<30%

## • OBSERVATION AND RESULT

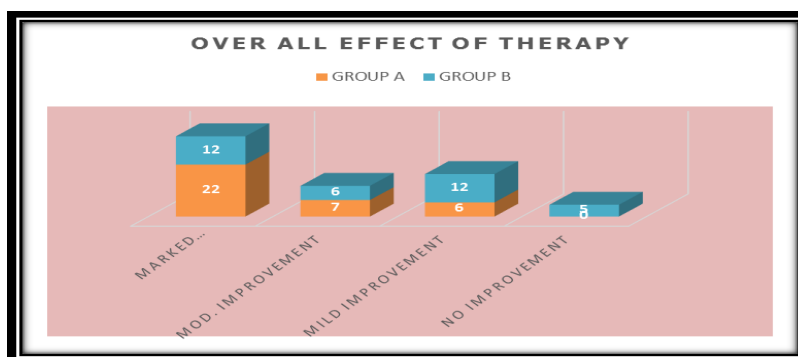
Data of patients were analyzed by using paired 't' test by considering group A for the subjects in first 30 days & same subjects considered as group B in next 30 days due to difference in intervention.

### Paired t test

Symptoms	Intervention	Group A (n=35)			Group B(n=35)		
		Mean±SD	T	P	Mean±SD	t	P
Mukhavakrata	Before	19.71±7.41	7.71	0.000	9.71±5.13	9.22	0.000
	After	9.71±5.13			1.14±3.22		
Netrastabdata	Before	21.14±7.18	8.13	0.000	11.14±5.82	10.11	0.000
	After	11.14±5.82			1.43±3.55		
Vaksanga	Before	19.71±8.22	8.13	0.000	10.00±6.86	8.30	0.000
	After	10.00±6.86			1.14±3.22		
Lalastrava	Before	18.24±7.47	6.56	0.000	10.00±6.41	7.82	0.000
	After	10±6.41			1.43±3.55		
Vedana	Before	20.57±7.25	14.71	0.000	8.00±6.77	6.79	0.000
	After	8.00±6.77			1.71±3.82		
Greevaupvartan	Before	7.14±4.58	4.76	0.000	3.14±4.71	3.43	0.000
	After	3.14±4.71			0.57±2.35		
Chalshira	Before	7.14±4.85	3.9	0.000	4.00±4.9	3.43	0.000
	After	4.00±4.47			0.57±2.35		

### OVER ALL EFFECT OF THERAPY

IMPROVEMENT	GROUP A	GROUP B
Marked Improvement	22	12
Mod. Improvement	7	6
Mild Improvement	6	12
No Improvement	00	05



## DISCUSSION

### Total results found after treatment of Group A & Group B

**In group A:** In this group 35 patients were given NavaneetaKhandam + Mahayograj guggulu for 30 days and observation taken at 10th, 20th & 30th day in this group highly significant

relief was found in *Netravikriti* (47.97%). Statistically significant relief was found in *Vaksang* (49.26%), *Mukhavakrata* (50.73%) *Griva-Chibuka-Dantanum Parsve Vedana* (61.10%), *Chalshira* (43.97%), *Lalasrava* (45.17%).

**In group B:** same 35 patients of *Ardita* treated with only *Navaneeta Khandam* in next 30 days & observation were taken at 40th, 50th & 60th day of treatment. In this group highly significant relief was found in *Netravikriti* (87.16%), *Mukhavakrata* (88.25%), *Griva-Chibuk-Dantanum ParsveVedana*(78.62%), *Chalashira*(85.75%), Statistically significant relief was found in *Vaksang* (88.60%), *Lalasrava* (88.60%).

### Overall effect of therapy

In assessing overall effect of therapy it was seen that - In group A out of 35 Patients, 62.85% were marked improved, 20% patients were moderately improved and 17.14% patients were mild improved.

In group B out of 35 patients 34.28% had improved marked, 17.14% patients had moderate improvement, and 34.28% patients had mild response while 14.28% patients shows no improvement.

So it is well observed that both the groups are affective, but *Navaneetkhanda + Mahayograj guggulu* in first 30 days were more effective.

### CONCLUSION

- 1) *Navanneeta Khandam* have definite efficacy in case of *Mukhardita*
- 2) Further elaborative study with large sample size with modifications in study design required.

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