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Case Study

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AYURVEDIC MANAGEMENT OF HALITOSIS – A SINGLE CASE **STUDY**

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ABSTRACT

Oral health is integral to general well-being and relates to the qualityof-life. According to Dental Association, 50% of the adult population has suffered from oral malodour disorder, while 25% appear to have a chronic problem. In about 90% of the genuine cases, origin of the odour is in the mouth itself. The standard Western medicine has had only limited success in the prevention of periodontal disease and in the treatment of a variety of oral diseases. Hence, the search for alternative products is required. The global need for alternative prevention and treatment options and products for oral diseases that are safe, effective and economical.

Ayurveda is an ancient Indian system of medicine that offers a various herbal medication effective and often considered free of toxicity of modern allopathic preparations. Kaval (mouthwash) is described in ayurvedic text for the treatment of various oral and dental problems. The present case study is focused on the possible role of kaval and gandush in the management of halitosis. Here is a single case study of halitosis treated with Khadiradi Kwath Kawal Dharana and Tiltaila Gandush.

INTRODUCTION

Oral hygiene is an important factor which has a significant impact on quality of life. Oral hygiene is the practice of keeping the mouth and teeth clean to prevent dental problems, most commonly, dental cavities, gingivitis, periodontal diseases and bad breath. Halitosis is unpleasant breath, regardless of its sources, oral or non-oral. Concern about halitosis is estimated to be the third most frequent reason for people to seek dental care. Hlitosis can correlate with the putiasyata. According to Dental Association, 50% of the adult population has suffered from oral malodour disorder, while 25% appear to have a chronic problem. In about 90% of the genuine cases, origin of the odour is in the mouth itself¹. The standard Western medicine has had only limited success in the prevention of periodontal disease and in the treatment of a variety of oral diseases. Hence, the search for alternative products is required. The global need for alternative prevention and treatment options and products for oral diseases that are safe, effective and economical.

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Halitosis^[2]

Odor emanating from oral cavity/ Bad breath

Types

- 1. Physiological-due due to comsumption of aromatic food substsnace garlic onion etc
- 2. Local pathological conditions- In about 90% of the genuine cases, source of the odour is in the mouth itself. The most common intra-oral causes are halitogenic biofilm i.e. plaque on the surface of teeth, posterior dorsal tongue, within the gingival grooves and periodontal pockets. other intra-oral causes which are less common. dry mouth due to decrease saliva production leads to bad breath.
- 3. Systemic cause. Extra-oral causes include disorders of nasal cavity, sinuses, lungs, stomach and liver. e.g. GERD, hyperacidity, diabetes, tosilitis etc.

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Putiasyata^[3]

पुत्यास्यता च तैरेव दन्तकाष्ठादिविव्दिषः। वा.उ.२१/६४ अ.सं.उ. २५/६४

Acharya Vagbhata mentions Puthyasya as one of the eight sarvasyaroga (diseases affecting whole oral cavity). Puthyasyaas a disease which develops due to malasanchiti (accumulation of debris) as a result of poor oral hygiene. Puthyasyatha-Word Puti = putrid or foul smelling Aasya = oral aity. Hence, this condition can be correlated to halitosis which develops due to poor oral hygiene. Words Durgandha and Putimukha are mentioned as symptoms dantasharkara, Sheetada and Upakusha. [8]

Kawal-Gandush^[4]

kavala and gandusha are well described as day to day practices to be followed by every individual i.e. dincharya upakrama.^[9] They are not simple cleansing techniques, but also treatment procedures for oral diseases as well as preventive measures.

Kavala and Gandusha are differentiated based on the dosage and procedure of using the drug.

सुखं संचार्यते या तु मात्रा स(सा) कवलः स्मृतः । असंचार्या तु या मात्रा गण्डूषः स प्रकीर्तितः।।

सु.चि. ४०-६२

According to Sushruta when liquids can be moved to and fro in mouth is called Kavala while when mouth is completely filled with liquid so that it cannot be moved here and there is called Gandusha.

Khadir^[5]

खदिरो रक्तसारश्च गायत्री दन्तधावनः ।

कण्टकी बालपत्रश्च बहुशल्यश्च यज्ञियः॥३०॥

खदिरः शीतलो **दन्त्यः** कण्डूकासा**रुचिप्रणुत्**॥३१॥

तिक्तः कषायो मेदोघ्नः कृमिमेहज्वरव्रणान्।

श्वित्रशोथामपित्तास्रपाण्डुक्ष्ठकफान् हरेत् ॥ ३२ ॥ भा.प्र. नि. वटादि वर्ग

Drug name	Ras	Vipaka	Virya	Karma
Khadira Acacia catchu	Tikta,	katu	sheeta	Dantya Ruchipranut
(mimosoideae)	kashay			krimighna, shothahar

AIMS AND OBJECTIVES

To study the effect of Khadiradi Kawal Dharan and Til Taila Gandush in management of Halitosis (putiasyata).

CASE REPORT

A 26 years old female patient, resident of ahemadnagar, visited the shalakya tantra opd in our ayurved hospital. She is presented with the complaint of bad breath since 1-2 years, recurrent plaque deposition on teeth.

Patient used mouthwash for 3 month with relief in symptom and often burning sensation in mouth decreased taste sensation.

Patient with no history of systemic disease.

General examination

• Nadi: Prakruta, 76/min

Mutra: Prakruta, 4 to 5 times/day, once at night

Mala: Prakruta, regular, once a day

• Jihwa: liptata

• Prakruti: Pittapradhan kaphanubandhi

BP: 130/90mmofHg

Pulse:76/minRR:18/ min

Treatment^[7]

Nidan parivarjanam- Advised to maintain oral hygiene

Kharidadi Kawal Dharana at morning everyday and Til Taila Gandusha once in a week for 1 month.

Procedure^[6]

Poorvakarma – swedan and mardan at head, neck and shoulder region

 Pradhankarma- Freshly prepared koshna khadiradi kwath given to patient in comfortable amount. Patient advised to tilt her head slightly upward and gargle swirl in oral cavity. once secreations starts from nasa and netra patient asked to spit out the liquid. Repeating procedure three time.

OBSERVATIONS AND RESULT

symptom	Before treatment	After 7 days	After 15 days
Daurgandhya	5	2	1
Mukhliptata	3	1	0

Result of this case study shows there is marked improvement in the symptoms of halitosis after the treatment.



DISCUSSION

In patients with halitosis due to poor oral hygiene and periodontal diseases, effective brushing, flossing, tongue cleaning can significantly reduce the malodour. If the complaint persists even after improving oral health, Most of the people with halitosis make regular use of mouthwashes containing antibacterial agents like chlorhexidine, zinc gluconate etc. They act by reducing bacterial load or the associated compounds causing the odour. But, long-term usage of these chemical based solutions can cause discomforts such as staining of teeth and burning sensation in the oral mucosa.

Kawal and gandush mode of action^[7]

1. The action of Kawala and Gandusha exerts increased mechanical pressure inside the oral cavity. So this increased pressure stimulates Pressoreceptor (stretch reflex) and Chemical constituent present in the drug also stimulate chemoreceptors present in the mouth. Once the

receptors are stimulated, they send signals to salivary nuclei in the pons and medulla. As a result, Parasympathetic nervous system activity glossopharyngeal (IX) nerve trigger dramatically increasing the output of saliva. Due to watery salivary secretion the waste formed by metabolic activity, food debris, accumulation and microorganism present in the oral cavity get dislodged and mix with residual medicated liquid and extracted from oral cavity. In this way Kavala and Gandusha serve as a successful form of oral rinse An enzyme called lysozyme present in saliva is bacteriostatic in action. It prevents the growth of pathogenic microorganisms in the oral cavity. Antibody IgA present in saliva also provide protection against microorganisms. Thus it increases local defence mechanism and promotes oral hygiene.

2 Sublingual mucosal layer inferior to the tongue is thin and highly vascular enough to permit the rapid absorption of the drugs into systemic circulation. Most of the dravas given for gandusha are sukhoshna (warm) so raised temperature causes the increased vascular permeability there by enhancing systemic absorption of drugs.

CONCLUSION

Poor oral hygiene is the main cause behind halitosis which has a great impact on social life of the individual. Improving oral hygiene is the main factor which will help reduce the halitosis. Most of the people prefer mouthwashes as they are easily available in the markets, but these solutions reduce the malodour only for few hours and chemicals in them can also cause discomfort.

Kavala and Gandusha procedures are used in dinacharya. These procedures are adopted to prevent and cure oral diseases Kavala and Gandusha procedures are very easy to do and the contents which are used for these procedures are very cheap and feasible. Thereby Kavala and Gandusha are effective, preventive and curative in various Oral diseases. Effectiveness of these procedures can be evaluated.

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