

“Role Of Tilnilotpal Gandusha In The Management Of Mukhapaka”

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Abstract : *Now a day lifestyle is drastically changed. Due to increased pollution, Fast life style, junk food habit and addictions problems of oral health are arising progressively. Therefore there are increased problems regarding bad oral hygiene. Among various Mukharogas, Mukhapaka is Pittaja Nanatmaja and Rakta Pradoshaja Vikara, characterized by Vedanayukta Vrana in the Mukhaguha. The lakshanas of Mukhapaka can be co-related with apthous ulcer (recurrent ulcerative stomatitis) explained in modern medical science.*

In Ayurveda, non-practice of gandusha etc. are said to be major cause for mukhapaka. Indirectly it infers the importance of gandusha because the physical, thermal and chemical causes of injury to oral cavity (due to exposure to various risk factors) can be better counteracted by practicing gandusha daily. Clinical trial on a single group of 60 patients having mukhapaka, was carried out.

Patients was given Tilnilotpaladi kwatha Gandusha for period of 7 days in every morning empty stomach.

60 patients studied, maximum number of patients (51.66) belonged to the age group of 20-30 years, Male sex (65%), and upper middle socio economics status (41.6%), mixed diet (61.66), addicted to smoking (38.33%), occupation (20%) IT professionals.

32% individuals have shown good response, 53% shown moderate Response, and 15% shown mild response.

KEYWORDS: Mukhapaka, Tilnilotpaladi Yoga, Apthous ulcer.

1. Introduction

Mukha Swasthya (oral hygiene) has gained importance now a day, because mukha is such anga, which is exposed to many risk factors in day-to-day life.

- Due to increased pollution, junk food habits and addictions like tobacco-guthaka chewing, smoking, soft drinks; problems are arising progressively.

- Therefore, problems regarding bad oral hygiene are progressively increased.
- In Ayurvedic text, Apthous ulcer is denoted as ‘Sarvasar rog’ or ‘Mukhapaka’ due to its spread in the complete oral cavity (mukha) [2, 3, 4].
- Mukhapaka is Pittaja Nanatmaja & rakta Pradoshaja Vikara, characterized by Vedanayukta Vrana in the Mukha guha.
- The lakshanas of Mukhapaka can be co-related with Apthous ulcer; explained in modern medical science

2. Aim

Management of Mukhapaka by Tilnilotpaladi Gandusha.

3. Objectives

- To study the role of Gandusha as an Upakrama of Dinacharya.
- To assess the role of Tilnelotpaladi Gandusha in the prevention of recurrent Mukhapaka.
- To study in detail about Mukhapaka. (Apthous ulcer).

This section includes following headings.

1. Ayurvedic review

- a. Mukha Shareera
- b. Mukhapaka
- c. Gandusha

2. Modern review

- a. Anatomy of oral cavity
- b. Pathology related to Apthous ulcer.

MUKHAPAKA

- Mukhapaka is a condition characterized by vedana & shophya yukta vrana in the mukha guha pratyangas.
- Mukhapaka can be correlated with a disease entity ulcerative stomatitis, in which apthous ulcers are very common with recurrent episodes.

Types – Acc. to Charak, Sushrut & Madhav nidan

1. Vataja Mukhapaka
2. Pittaja Mukhapaka

3. Kaphaja Mukhapaka
Vaghbata - Raktaja and Sannipataja mukhapaka.

GANDUSHA

- The word Gandusha is formed by Gadi + Gandescha which mean mukha purnam i.e. filling the mouth.

Gandusha is the procedure of holding any liquid in the mouth to its full capacity without any movement inside. It is usually done with drava (liquid)

TYPES

Based on doshagnata and karmukata Gandusha is classified mainly into four types. They are -

- Snaihika (lubricating) – indicated in diseases of vata
- Shamana (matigating) – indicated in diseases of pitta
- Shodhana (purificatory) - indicated in diseases of kapha
- Ropana (healing) – indicated in ulcerations of mukha

Anatomy of Mouth

- A mucosa lined cavity is also called the oral cavity or Buccal (bucca-cheeks) cavity.
- It is formed by cheeks laterally, soft and hard palate superiorly.
- Anterior opening is oral orifice & posteriorly it is continuous with the oropharynx.

REVIEW OF STOMATITIS :

Definition: General term for diffuse inflammation of the mouth.

Apthous ulcer (recurrent ulcerative stomatitis) :

- This is a commonest recurrent condition of unknown etiology characterized by painful superficial ulcers in movable mucosa of the mouth.
- Generally these ulcers are seen in buccal mucosa, lips, tongue, floor of the mouth, soft palate & oro-pharynx.

ETIOLOGY

- The cause is obscure.
- Some probable causative factors are emotional stress, viral infections, endocrine disorders psycho-somatic factors, habitual constipation, auto-immune reaction.

TYPES

There are three main clinical types

1. Minor apthae
2. Major apthae
3. Herpetiform apthae

MATERIALS AND METHODS

Title of study:-

“Role of Tilnilotpaladi Gandusha in Management of Mukhapaka”

Place of study:-

OPD and IPD of B.V.D.U. Ayurved Hospital, Pune ,Maharashtra (India).

Sample Size:- Clinical trial on a single group of 60 persons having mukhapaka, was carried out.

Drug & Duration of Therapy:-

Selection of Upakram :-

Upakrama :- Gandusha

Time :- In Morning (After Dantadhavana)

Form :- Kashaya (Decoction)

Quantity :- 80-120 ml (As per oral liquid holding capacity of the patients)

Drug Ingredients-

Tilnilotpaladi yoga:-

- 1.Tila (Sesamum Indicum)
- 2.Nilotpal (Nymphaea stella)
- 3.Ghee
- 4.Sugar,
- 5.Milk
- 6.Honey. (5)

Procedure :-

- The patient asked to sit in erect posture.
- The neck, cheeks and the forehead of the patient to be treated with Gandusha, massaged and fomented.
- Gandush has been so long held in the mouth by the patient till the aggravated dosha accumulated in regions of the cheeks or secreted through the nostrils & the eyes.

Inclusion Criteria

- Patient complaining of recurrent Mukhapaka.
- Patients between age group of 20-50 years.
- Patients of both sex included in the study.

Exclusion Criteria

As per Bhavaprakasha Purvakhanda, patient contraindicated for Gandusha excluded –

- Gandusha is contraindicated in unconscious, poisoned, weak, krisha person, patient suffering from bleeding disorders and conjunctivitis.
- Patient having chronic or carcinogenic ulcers in oral cavity.
- Mukhapaka due to any other disorders e.g. Syphilis, AIDS, Dengue Haemorrhagic Fever etc.
- Patients suffering from any other systemic disorders.

ASSESSMENT CRITERIA

Efficacy of the therapy was assessed in the signs and symptoms before and after the course of Gandusha.

It was assessed on the basis of self-formulated scoring scale to signs and symptoms of Mukhapaka .

FOLLOW UP

Follow up will be done periodically for total duration of 21 days.

- 1st follow up :- 3th day
- 2nd follow up:- 7th day
- 3rd follow up :- 14st day (Post Treatment)
- 4th follow up:- 21th day (Post Treatment)

OBSERVATION AND RESULTS

1.Age wise distribution :-There were maximum no. of patients i.e.51.67 % in age group 20-30 and 38.33% in age group 30-40 also minimum no. of patients i.e.10% in age group 40-50.

2.Sex wise distribution

There were Maximum no. of patients i.e. 65 % were males and 35% were females.This indicated its more incidence rate in males.

3.Dietary Habitat wise distribution

There were Maximum no. of patients i.e. 61.67% were mixed and minimum i.e.38.33% were vegetarian. The ancient Ayurvedic physicians were aware of the ‘Apathyakara Ahara and Vihara’ (un salutary life style and food habits) as the most important causative agent [6, 7, 8].

RESULTS

1.Effect of Tilonilopaladi Yoga on Ruja in the management of Mukhapaka

Ruja (Pain) :-

Grade	BT		AT	
	No. of patients	BT	No. of patients	AT
No Pain	4	6.66%	32	53.33%
Mild Pain	36	60%	21	35%
Moderate pain	20	33.33%	7	11.66%
Sever pain	0	0%	0	0%
Total	60	100%	60	100%

Parameter	N	Mean		Std Deviation		Positive rank	Negative rank	Tie	Z value	P value	Interpretation
		BT	AT	BT	AT						
Ruja	60	0.766	0.253	0.721	0.536	10	17	24	-0.652	0	S

Here P value was >0.05 hence accept H₀ i.e.

On associated symptoms of Mukhapaka, the improvement observed on Ruja (66.97%) was statistically significant.

2.Effect of Tilnilotpaladi Yoga on Daha in the management of Mukhapaka

Daha (Burning Sensation) :-

Grade	BT		AT	
	No. of patients	BT	No. of patients	AT
No Daha	0	0%	32	53.33%
Mild Daha	34	56.66%	28	46.66%
Moderate Daha	26	43.33%	0	0%
Sever Daha	00	0%	0	0%
Total	60	100%	60	100%

Here P value was <0.05 hence reject H₀ i.e.

Parameter	N	Mean		Std Deviation		Positive rank	Negative rank	Tie	Z value	P value	Interpretation
		BT	AT	BT	AT						
Daha	60	2.6	0.466	0.616	0.503	0	59	1	0.679	0	S

On associated symptoms of Mukhapaka, the improvement observed (82%) on Daha was statistically significant.

3.Effect of Tilnilotpaladi Yoga on RaktaVarnata of vrana in the management of Mukhapaka

Rakta Varnata of vrana[Redness] :-

Grade	BT		AT	
	No. of patients	BT	No. of patients	AT
No Redness	0	0%	14	23%
Dull Red (or) pink red	33	55%	44	73%
Color of Magenta	22	37%	2	3%
Bright Red	5	8%	0	0%
Total	60	100%	60	100%

Parameter	N	Mean		Std Deviation		Positive rank	Negative rank	Tie	Z value	P value	Interpretation
		BT	AT	BT	AT						
Rd.ofVran	60	1.533	0.8	0.65	0.48	0	38	22	-5.809	0	S

Here P value was <0.05 hence reject H₀ i.e.

On associated symptoms of Mukhapaka, the improvement observed (91%) on RaktaVarnata of vrana was ethically significant.

4.Effect of Tilnilotpaladi Yoga on No. Of Vrana in the management of Mukhapaka

Parameter	N	Mean		X	% of relief	SD		Std error		Z value	p value
		BT	AT			BT	AT	BT	AT		
No.OfVrana	60	1.116	0.433	0.683	61.20%	0.666	0.499	0.086	0.065	7.827	0.00003

Before treatment the mean score of No.Of Vrana was 1.116 which was reduced to 0.433 after treatment with 61.20% relief also p value is <0.05 hence it is statistically significant .

5.Effect of Tilnilotpaladi Yoga on Size of Vrana in the management of Mukhapaka

Parameter	N	Mean		X	% relief	SD		Std error		Z value	p value
		BT	AT			BT	AT	BT	AT		
Size of Vrana	60	0.726	0.266	0.134	63.36%	0.616	0.445	0.079	0.058	6.823	0.003

Before treatment the mean score of Size of Vrana was 0.726 which was reduced to 0.266 after treatment with 63.36 % relief but p value is <0.05 hence it is statistically significant.

6.Effect of Tilnilotpaladi Yoga on frequency of attack in the management of Mukhapaka:-

Parameter	N	Mean		X	% of relief	SD		Std error		Z value	p value
		BT	AT			BT	AT	BT	AT		
Freq attack	60	0.867	0.3	0.5667	65.39%	0.5956	0.462	0.076	0.059	6.082	0.000032

Before treatment the mean score of Freq attack was 0.867 which was reduced to 0.3 after treatment with 65.39% relief also p value is <0.05 hence it is statistically significant .

7.OVERALL IMPROVEMENT

improvement	No. of patients	percentage
Marked improvement	19	32%
Moderate improvement	32	53%
Mild improvement	9	15%
No improvement	0	0%
Total	60	100%

The above graph showed that there were 32 % patients have shown good response, 53% shown moderate while only 15% patients have shown mild response

8.Study of Recurrence:-

Grade	No. of Patients	%
Recurrence	53	88.33
Mild Recurrence	04	6.66
Moderate Recurrence	03	5
Sever Recurrence	00	0

-88.33% Patient had no. recurrence after 21 days follow up study.

-6.66% patients had recurrence of mild intensity.

-5% patients had moderate degree of recurrence.

CONCLUSION

The conclusions drawn on the basis of this study are as follows.

1. The lakshanas of mukhapaka can be correlated to a clinical entity“Apthous

ulcer” (recurrent ulcerative stomatitis) explained in the contemporary medical science, which is also characterized by painful Superficial ulcers in the movable mucosa of the mouth with recurrent

- episodes.
2. Gandusha upakrama of dinacharya on of the important methods Mentioned in Ayurveda for maintenance of oral hygiene.
 3. Out of 60 patients studied, maximum number of patients (51.666%) belonged to the age group of 20-30 years, Male sex (65%), and upper middle socio economic status (41.66%), mixed diet (61.66%), addicted to smoking (38.33%). occupation (20%) IT professionals.
 4. Most of the patients were of pitta kaphaprakriti (46.33%), with positive history of ratrijagarana (60%).
 5. 32% individuals have shown good response, 53% shown moderate Response, and 15% shown mild response.
 6. As Tilnilotpaladi Gandusha having madhur, kashyarasa, shetavirya and kaphahe-pittaghn properties, It removes aggravated kaph and pitta Guna from oral cavity.
 7. Hence from the study it is concluded that, Tilnilotpaladi Gandusha is an important upakrama of Dinacharya mentioned in Samhitas which should be followed regularly, in order to prevent Mukharogas and maintain oral hygiene.

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