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Role Of *Nasya* In *Ardita* W.S.R To Facial Palsy: A Review

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ABSTRACT:

Ardita is a medical condition causing the *Vakratha* [deviation] of *Mukha ardha* and leads to facial asymmetry and malfunction. It occurs due to aggravated *Vata Dosha*. It has been enumerated in *Vata Nanatmaja Vyadhi* by *Acharya Charaka*. *Ashtang hridaya* has said it as *Ekayaam* (loss of movement involving one half of the face or half of the body with half of the face). According to *Acharya Charaka* it affects *Sharirardha* while half side of the face is affected in *Ardita* according to *Acharya Sushruta*. It can be correlated to facial palsy in modern which carries similar complaints to *Ardita* of deviation of half of the face with sensory & motor impairment on the affected side. According to *Acharya Charaka Nasya (Navana Nasya)* is the specific treatment of *Ardita*. *Sneha* is considered as best *Vatashamaka*. Viscosity of *Sneha* increases the absorption of the drug by increasing the contact time to the nasal mucosa (*Viryam Yavataddivasat Nipatatcha*) & lipophilic drugs have better absorptive capacity hence *Navana Nasya* is considered best.

Keywords- *Ardita, Vata, Facial palsy, Navana Nasya, Sneha*

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INTRODUCTION

The word “*Ardita*” refers to “the condition caused due to unusual *Vata* vitiation, which turns face in an opposite direction” [1]. *Ardita*, a *Vatika* disorder is included among the 80 *Nanatmaja Vata Roga* by *Acharya Charaka* and *Vagbhata*. *Vata* is the main element of the body which helps in controlling, maintaining, formation for various bodily activities and compounds. It controls all the sense organ in normal state and cause morbidity and mortality when abnormal [2]. Face, is the mirror of the mind, which conveys the emotions like happiness, sadness, anger, disgust, fear and so on. The ability of both verbal communication & facial expression is hampered in *Ardita*. *Ardita* is mentioned in *Brihattraai*, *Laghutrai*, and in some other popular texts like *Kashyap Samhita* and *Bhela Samhita*. According to *Arundatta & Sharangdhara*

half side of the face is affected. It is considered as *Asthimajjagata Vata* according to *Bhel Samhita* [3]. *Vagbhata* has stated that *Ardita* results by the vitiation of *Pranavata*. [4] Even *Rakta Kshaya* can manifest *Ardita*. [5] *Acharya Charaka* has quoted *Vata Vyadhi Nidana* as the *Nidana* of *Ardita* & has explained it as a complication of suppressing urge to sneeze in *Navegaandharaniya Adhyaya* [6]. *Vagbhata* has stated *Ardita* as a result of vitiation of *Prana Vata*. Both *Susruta* [7] & *Vagbhata* [8] have enumerated the cause of *Ardita* as talking loud, due to lifting heavy weight on heads, excessive laughing, sudden fear, sleeping on uneven bed or other *Vatavardhaka Ahara- Vihara*. This *Vata* gets localized in head, nose, lip, chin, forehead, eyes & causes deviation of half side of face & neck. *Raktkshaya* has also

been manifested as the cause by *Acharya Susruta*. The prodromal symptoms explained by *Acharya Susruta*^[9] are *Romaharsha* (goosebumps), *Vepana* (tremors), *Avil Netrata* (blurred vision), *Twachi swapa*(loss of sensation of skin), *Toda*(pain), *Manyastambha* (stiffness of neck), *Hanugraha*(jaw stiffness).

Clinical features by *Acharya Susruta* include deviation of the angle of mouth & neck, tremors in neck, difficulty in speech, & distortion of eyes, ear & nose, pain in neck, chin, teeth of the affected side^[10]. Other symptoms explained by *Acharya Charaka* are difficulty in food ingestion, protruded tongue, slurred speech, while laughing, speaking etc, the face gets deviated or distorted to the normal side, loosening of tooth, sneeze gets suppressed, hearing & speech impairment^[11].

According to *Bhavmishra & Yogratnaka*^[12], there are 3 types of *Ardita* based upon the *Doshas*.

- *Vata Ardita*: excessive salivation, pain, lock jaw, edema over lips
- *Pitta Ardita*: thirst, yellowish color of face, *Daha*, *Jwara* (fever)
- *Kapha Ardita*: edema & stiffness in neck

Samprapti

Samprapti of Ardita can be understood in two steps i.e. *Dhatukshayajanya* and *Margavarajanya*.

Dhatukshayajanya - Excessive consumption of *Apathya Ahara* (Ruksha, Laghu, Kathin), *Apathya Vihara* (Ratri Jagran, Ati Vyayama) leads to *Agni Dusti* as a result of which *Rasa* and *Utrottar Dhatu Kshaya* takes place. *Dhatu Kshaya* leads to movement of vitiated *Vata* from their site towards hollow *Srotas* in *Urdhwa Jatru Gata Bhaga* and takes *Sthana Samsharaya* in *Mukhardha* causing *Ardita Roga*.

Margavarajanya- *Ama*, *Vega Sandharna* and *Marmaghata* cause *Sanga* in *Srotas*. As a result of which there is improper filling of *Srotas* beyond the *Sanga*. Improper filling produces *Rikatata* in *Srotas* beyond the site of *Sanga*, as a result of which *Vimargamana* of vitiated *Vata* takes place. The *Vimargamit Vata* takes *Sthana Shamsharya* in *Mukhardha* and produces the *Ardita Roga*. *Ardita* can be correlated with Facial paralysis on the basis of its signs & symptoms mentioned in texts. It is commonly caused due to the lesion found on the seventh cranial nerve i.e facial nerve which leads to disability to move or weakness of the unilateral side of the face. The condition could be congenital or could

be caused as a result of infection, stroke, toxicity, neoplastic or due to an injury or inflammation of 7th cranial nerve (facial nerve). Among the cases, Bell's palsy cases are highest. The term Bell's palsy^[11] is used when the cause of peripheral facial nerve paralysis is idiopathic. Epidemiology^[12] of the disease is 6.4 to 20 per 1000 lifetime prevalence. Incidence increases with age. Slight female predominance is found.

The modern anatomical facts reveal that, the facial nerve paralysis may be supra nuclear or infra nuclear one. The supra nuclear facial paralysis involves the UMN pathway & is usually part of hemiplegia. The infra nuclear one is related with point where the nerve can be injured (site of lesion)^[13].

- Lesion in Pons: Damage to many other nuclei (Abducens, spinal trigeminal, sensory)
- Lesion in Internal Acoustic Meatus: Loss of taste, deafness, facial paralysis
- Lesion in Facial Canal: Results in sensitivity to one ear (hyperacusis)
- Lesion Petrous Bone: Chorda tympani is involved

Symptoms include loss of taste, hyperacusis (high pitched sound appears louder than normal), the corner of the mouth droops, the creases and skinfolds are effaced, and

eyelids don't close. There is sagging of lid and falls away from conjunctiva permitting spilling over the cheeks. Symptom may develop over several hours^[14].

Acharya Charaka has explained *Navana Nasya* as mode of treatment for *Ardita*. *Nasyakarma* is a process wherein the drug herbalized oils and liquid medicines is administered through the nostrils. These motor and sensory functions are controlled from the epitome of the head, which is considered as "*Uttamanga*"; as stated by *Vagbhatt* "*Nasa hi shirhso dwaram*" i.e. nose is the gateway of the head. The drug administered through nostril reaches *Shringataka Marma* by *Nasastrotas* and spreads in the brain reaches at a junction place of *Netra* , *Shrotra* , *Kantha*, *Siramukhas* (opening of the vessels) etc. and remove or detach the morbid *Doshas* present above supraclavicular region and expel them from the *Uttamanga*. Anatomically *Shrinagata Marma* has been taken as cavernous sinus. This sinus drains into the facial vein through superior ophthalmic veins. Facial vein is the largest vein of the face and drains ear, nose and mouth. This anatomy clarifies the term *Santarpan*(nutrition) of ear, nose and mouth. So any medicine given through nose reaches the *Shringataka Marma* and does

Tarpan of structures of ear, eyes, nose and throat via *Siras*. Medicine given through nostrils travels the entire passage and reaches the cribriform plate, which is porous in nature. From there it is absorbed and reaches the tissues of brain. It is like the local application on the tissues of brain. Drugs used in *Nasya karma* have *Katu*(pungent), *Ushna*(hot), & *Teekshna*(sharp) properties. These drugs produce *Draveekarana*(liquefaction) & *Chedana*(expulsion) of vitiated *Doshas*. *Kashaya Rasa* (astringent) drugs produce astringent effect, while *Madhura Rasa* (sweet) drugs produce a cooling & nourishing effect ^[15]. *Navana Nasya* can further be classified as *Snehana* and *Shodhan* type. *Snehana Nasya* as the name suggests gives strength to all the *Dhatus*. It is specifically used for *Vatika Sirahshula*, *Keshapata*, *Dantapata*, *Damnaka* and other *Vatapittaja Rogas*. It is also used for curing *Shirahkamp* and *Ardita*. *Shodhan Nasya* is prepared by *Sirovirechana Dravya* like *Pippali*, *Sigru* etc. It eliminates vitiated *Doshas* from *Urdhvajatrugata* part of the body. It is specifically indicated in *Kapha* dominant condition.

DISCUSSION

In facial palsy, facial nerve dysfunction leads to facial muscle paralysis with impairment of both sensory and motor functions ^[16]. *Ardita* is a disease caused by vitiated *Vata* and it is responsible for all motor, sensory and biological activities. *Nasya* preceded by *Abhyanga* stimulate the nerves by increasing neural conductivity and improves circulation. Also, *Abhyanga* with *Sneha* nourishes the *Kapha* and provide strength to the facial muscles. *Nadi Sweda*, a fomentation by vapors of the decoction is given to face. This stimulates nerve endings & open the micro channels below skin level due to which *Nasya Dravya* is better absorbed. Efferent vasodilator nerves are spread out on the superficial surface of face. These receptors receive stimulation which results in an increase in the blood circulation in the head i.e. momentarily hyperemia. By means of these facial stimulations, the cerebral capillaries dilate up to 22% which ultimately results in 150% blood inflow. Head low position with slight elevation of legs facilitates the absorption of the drug.

Nasya acts through blood brain barrier, olfacto hypothalamo pituitary pathway, influencing limbic system, stimulation of

baroreceptors in the carotid sinus, momentary hyperemia & absorption (vascular or lymphatic). It surpasses first pass metabolism hence higher bioavailability is present. Rapid action and quick onset of action is seen. The olfactory mucosa is in direct contact with the brain & CSF. Medications absorbed across the olfactory mucosa directly enter the brain. Cellular membrane is composed on layers of lipid material. Lipophilic drugs used in *Navana Nasya* are rapidly absorbed across the mucous membrane. *Nasya Karma* definitely has impact on central nervous system. *Nasya* provides nourishment to the nervous system through vascular, lymphatic and neural pathway surpassing first pass and hepatic metabolism and crossing blood brain barrier. *Sneha* used in the *Nasya* pacifies the aggravated *Vata* and gives strength to all the *Dhatu*s thus subsiding the sign and symptoms of *Ardita*. *Snehana Nasya* can be used in *Dhatukshayajanya Samprapti* as it does *Poshan* of *Dhatu*s while *Shodhan Nasya* is used in the *Margavarodhajanya Ardita* as it clarifies the *Srotas* and removes the *Sanga*. Thus *Nasya* helps in *Samprapti Vighatana* of

Ardita. Extra accumulated *Dosha* are expelled out from small blood vessels. Ultimately Morbid *Doshas* are expelled out as nasal discharge, tears and salivation.

CONCLUSION

Ardita, being a *Vata-vyadhi* which is neuromuscular in origin can be managed through *Ayurvedic* treatment modalities effectively. The features of *Ardita* as per *Ayurveda* in modern parlance based on the symptoms characterized by weakness & impairment of the half part of the facial muscles along with loss of sensory functions which very much resembles facial nerve palsy. “*Vatasyopakrama sneha sweda...*” is the quotation that is highlighting about the primacy of *Sneha Dravya* in the treatment aspects of *Vata Vyadhi* and it holds good in *Ardita* also. *Nasya* can provide promising solution in arresting the disease progression and in the symptomatic management of the disease.

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